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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 12 0 1 2007 12 3 1 2007 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 0 1 30 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC [®] D " D 12 1 2 0 1 2007 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand Ž007 1038787.58 January 1 (b) Cash on Hand at 1255483.35 Begining of Reporting Period 393709.35 1760648.38 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1649192.70 2799435.96 6(a) and 6(c) for Column B) 141831.74 1292075.00 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1507360.96 1507360.96 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	248158.29	763441.00
(ii) Unitemized	85646.78	391181.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	333805.07	1154622.99
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	6750.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	333805.07	1161372.99
Transfers From Affiliated/Other Party Committees	43991.42	574966.42
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	2022.40
to Federal candidates and Other Political Committees	7000.00	9500.00
7. Other Federal Receipts (Dividends, Interest, etc.)	8912.86	12786.57
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	393709.35	1760648.38
Total Federal Receipts (subtract Line 18(c) from Line 19)	393709.35	1760648.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other

> (b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

(a) Shared Federal Election Activity

(i) Federal Share

(ii) "Levin" Share

With Federal Funds (c) Total Federal Election Activity (add

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

32. Total Federal Disbursements

from Line 31).....

(from Schedule H6)

Than Political Committees

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 16451.74 21486.90 Expenditures..... 16451.74 21486.90 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 Committees..... Federal Candidates/Committees.....and Other Political Committees..... 116450.00 1260030.00 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 0.00 750.00 0.00 0.00 0.00 0.00 (such as PACs) 0.00 750.00 (add Lines 28(a), (b), and (c)) 8930.00 9808.10 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) 0.00 0.00 0.00 0.00 (b) Federal Election Activity Paid Entirely 0.00 0.00 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 141831.74 1292075.00

141831.74

1292075.00

FE6AN026	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	333805.07	1161372.99
34.	Total Contribution Refunds (from Line 28(d))	0.00	750.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	333805.07	1160622.99
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16451.74	21486.90
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2022.40
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	16451.74	19464.50

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 305 (check only one) X 11a
or	for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Kim C. Byas, Sr., MPH,		Date of Receipt
	Mailing Address One North Franklin City	State Zip Code	1 2
	Chicago	IL 60606-3436	Transaction ID: 14772507 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ray E. Allen, M.D.		Date of Receipt
	Mailing Address 1113 N. Jordan		12 04 2007
	City	State Zip Code	Transaction ID: 14800251
	Liberal	KS 67901-2409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	475.00
	Name of Employer Southwest Medical Center	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
	Full Name (Last, First, Middle Initial) Mr. Todd Burch		Date of Receipt
	Mailing Address P O Box 415	-	12 04 2007
	City	State Zip Code	Transaction ID: 14800260
	Tribune FEC ID number of contributing federal political committee.	KS 67879-0415	Amount of Each Receipt this Period 500.00
	Name of Employer Greeley County Health Ser-	Occupation Administrator and Chief Executive Off	fi
	vices Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
e	JBTOTAL of Receipts This Page (optional)		1475.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or fo	information copied from such Reports and Str commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC	itatements may r name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. F	ull Name (Last, First, Middle Initial) Irs Laraine I. Gengler			Date of Receipt
_	Mailing Address 401 Cedar Circle	State	Zip Code	1 2 0 4 2 0 0 7 Transaction ID: 14800270
	indsborg	KS	67456-2328	Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	3.00 2020	252.50
<u>ta</u>		Occupation Chief Fina	ncial Officer	
R	eceipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 277.50	
. <u>E</u>	ull Name (Last, First, Middle Initial) dward J. Hett, MD			Date of Receipt
IV	lailing Address 3021 Bluebird			12 04 2007
C	ity	State	Zip Code	Transaction ID: 14800290
<u>V</u>	Vichita	KS	67204-5308	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		250.00
V	lame of Employer lia Christi Health System	Occupation President,	РМА	
R	eceipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) fr. Roger S. John			Date of Receipt
N	failing Address P O Box 506			12 04 2007
	ity	State	Zip Code	Transaction ID: 14800296
	Phillipsburg	KS	67661-0506	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		417.50
<u>n</u>	ame of Employer Great Plains Health Allia- ce, Inc.		and Chief Executive Office	r
K	eceipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 667.50	
SUE	BTOTAL of Receipts This Page (optional)			920.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mrs. Laurie Labarca Mailing Address 8242 E. Greenbriar Ct City Wichita FEC ID number of contributing federal political committee.	State Zip Code KS 67226-1807	Date of Receipt M M M
Name of Employer Via Christi Rehabilitation Center Receipt For: Primary Other (specify) ▼	Chief Operating Officer Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Terry R Lambert, , CHE Mailing Address 1510 W. 20th Park Pla	ace	Date of Receipt 1 2 0 4 2 0 0 7
City	State Zip Code	Transaction ID: 14800300
Emporia FEC ID number of contributing federal political committee.	KS 66801-5790	Amount of Each Receipt this Period 275.00
Name of Employer Newman Regional Health Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) Mr. William K Mahoney		Date of Receipt
Mailing Address 511 Cedar Cove		12 04 YYYY 12007
City	State Zip Code	Transaction ID: 14800305
Parsons FEC ID number of contributing federal political committee.	KS 67357-2256	Amount of Each Receipt this Period 275.00
Name of Employer Labette Health	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
SUBTOTAL of Receipts This Page (optional)		800.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 305 (check only one) X
or for co	ormation copied from such Reports and Si ommercial purposes, other than using the ME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	erican Hospital Association PAC			
Mr. 0	Name (Last, First, Middle Initial) Gerald J Marquette, , Jr. ing Address 1400 West Fourth			Date of Receipt
	1100 110011	21.1	7: 0 1	12 04 2007
City Cof	feyville	State KS	Zip Code 67337-3306	Transaction ID: 14800306 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C		250.00
<u>cal (</u>	ne of Employer eyville Regional Medi- Center	Occupation Chief Exe	n ecutive Officer	
Rece	eipt For:	Aggregate	e Year-to-Date ▼ 250.00	
Mr. 0	Name (Last, First, Middle Initial) Gerald J Marquette, , Jr.			Date of Receipt
Maii	ing Address 1400 West Fourth			12 04 2007
City	6 - 10	State	Zip Code	Transaction ID: 14800308
FEC	feyville ID number of contributing ral political committee.	KS C	67337-3306	Amount of Each Receipt this Period 162.50
<u>cal (</u>	ne of Employer eyville Regional Medi- Center	Occupation Chief Exe	n ecutive Officer	
Rece	eipt For:	Aggregate	e Year-to-Date ▼ 412.50	
	Name (Last, First, Middle Initial) Janice S McCart			Date of Receipt
Maili	ing Address 1818 Harvey Ct			1 2 0 4 2 0 0 7
City		State	Zip Code	Transaction ID: 14800309
<u>Coll</u>	•	KS	67701-1518	Amount of Each Receipt this Period
fede	ID number of contributing ral political committee.	C		375.00
	ne of Employer rens Medical Center	Occupation CEO		
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
OUDT.	OTAL of Receipts This Page (optional)	•		787.50

City Topeka FEC ID number of contributing federal political committee. Name of Employer State Zip Code Shawnee FEC ID number of contributing federal political committee. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert K. Page Mailing Address 12610 W. 71st. St. City State Zip Code KS 66216-2635 FEC ID number of contributing federal political committee. C City State Zip Code KS 66216-2635 FEC ID number of contributing federal political committee. Name of Employer University of Kansas Hosp- Isla Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C FEC ID number of contributing federal political committee. C City State Zip Code Transaction ID: 14800368 Amount of Each Receipt this Period Date of Receipt Sou.00 Date of Receipt Transaction ID: 14800368 Amount of Each Receipt this Period Date of Receipt Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code KS 66611-1629 Transaction ID: 14800371 Amount of Each Receipt this Period		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. A. American Hospital Association PAC Full Name (Last, First, Middle Initial) Milling Address 6508 SW 28th City Topeka FEC ID number of contributing federal political committee. Receipt Transaction ID: 14800364 FEC ID number of contributing Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mir Robert IK Page Mailing Address 12810 W. 71st. St. City Shawnee KS 66216-2635 FEC ID number of contributing federal political committee. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mir John C. Peterson Mailing Address 2841 SW Plass Avenue City Topeka FEC ID number of contributing FEC ID number of contributi	,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Mr. Larry W. Morris Mailling Address 6508 SW 28th City State Zip Code Topeka KS 66614 FEC ID number of contributing federal political committee. Name of Employer Stormort. Vall Health Care Director Receipt For: Primary General Otter (Last, First, Middle Initial) Mr. Robert K. Page Mailling Address 12610 W. 71st. St. City State Zip Code KS 66216-2635 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 14800364 Amount of Each Receipt this Period Transaction ID: 14800368 Amount of Each Receipt this Period Transaction ID: 14800368 Amount of Each Receipt this Period Transaction ID: 14800368 Amount of Each Receipt this Period Transaction ID: 14800368 Transaction ID: 14800368 Transaction ID: 14800368 Amount of Each Receipt this Period Transaction ID: 14800368 Transaction ID: 14800368 Transaction ID: 14800368 Amount of Each Receipt this Period Transaction ID: 14800368 Transaction		` '			
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Topeka KS 66614 FEC ID number of contributing federal political committee. Name of Employer University of Kansas Hosp-Lital Receipt For: Primary General Occupation Shawnee FEC ID number of contributing federal political committee. Name of Employer Occupation Name of Employer Occupation Name of Employer Occupation City State Zip Code KS 66216-2635 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code KS 66611-1629 FEC ID number of contributing CC Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. C State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. Primary General State Strategies/KHA Aggregate Year-to-Date ▼		Mailing Address 6508 SW 28th			
FEC ID number of contributing federal political committee. Name of Employer Stormont Vall Health Care Primary General Other (Last, First, Middle Initial) Name of Employer Stormont Vall Health Care Primary General Other (Specify) ▼ 262.50 Date of Receipt Primary General Other (Specify) ▼ 262.50 Date of Receipt Date of Receipt Transaction ID: 14800368 Amount of Each Receipt this Period Cc. State Zip Code State Zip Code State Securitive Officer Receipt For: State Zip Code State Securitive Officer Receipt For: State Securitive Officer Aggregate Year-to-Date ▼ State Securitive Officer Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue Ct. State Zip Code State Zip Code State Securitive Officer Receipt For: State Zip Code State Securitive Officer Receipt For: State Zip Code State Securitive Officer Name of Employer State Securitive Officer Receipt For: Securitive Officer Occupation Occupation State Securities Period Cc. State Securities Period Primary General Occupation Occupation Strategies/KHA Aggregate Year-to-Date V Securities Period Primary General Occupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date V Securities Period Primary General Occupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date V Securities Period Receipt For: Securities Se				•	
Same of Employer Stomont-Vall HealthCare Occupation Director		Topeka	KS	66614	Amount of Each Receipt this Period
Stormort-Vall HealthCare Receipt For:			C		262.50
Primary General Other (specify) ▼		Name of Employer Stormont-Vail HealthCare		n	
Other (specify) ▼ Cable		Receipt For:	Aggregate	e Year-to-Date ▼	
Mr. Robert K. Page Mailing Address 12610 W. 71st. St. City State Zip Code Shawnee KS 66216-2635 FEC ID number of contributing federal political committee. Name of Employer University of Kansas Hosp-lital Receipt For: Primary General Other (specify) ▼ City State Zip Code KS 66216-2635 Amount of Each Receipt this Period Cocupation Chief Executive Officer Aggregate Year-to-Date ▼ 12 04 200.7 Transaction ID: 14800368 Amount of Each Receipt this Period Date of Receipt Transaction ID: 14800371 Topeka State Zip Code KS 66611-1629 Transaction ID: 14800371 Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Cocupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date ▼ Primary General				262.50	
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Shawnee KS 66216-2635 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer University of Kansas Hosp-lital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code Transaction ID: 14800371 Topeka KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Occupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date ▼		Mailing Address 12610 W. 71st. St.			
FEC ID number of contributing federal political committee. Name of Employer University of Kansas Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue Peter State Zip Code KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Administrator, Capitol Strategies/KHA Receipt For: Primary General Occupation Aggregate Year-to-Date ▼ Occupation Administrator, Capitol Strategies/KHA Receipt For: Primary General Aggregate Year-to-Date ▼		City		Zip Code	Transaction ID: 14800368
Name of Employer University of Kansas Hospital Receipt For: Primary General Other (specify) ▼ Mailing Address 2841 SW Plass Avenue		Shawnee	KS	66216-2635	Amount of Each Receipt this Period
University of Kansas Hospital Receipt For: Primary			C		500.00
Receipt For: Primary General 500.00		University of Kansas Hosp-			
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code Topeka KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Name of Employer Kansas Hospital Association Receipt For: Primary General Date of Receipt M M M M D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			Aggregate	e Year-to-Date ▼	
Mr. John C. Peterson Mailing Address 2841 SW Plass Avenue City State Zip Code Topeka KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Administrator, Capitol Strategies/KHA Receipt For: Primary General Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				500.00	
City State Zip Code Topeka KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General State Zip Code Transaction ID: 14800371 Amount of Each Receipt this Period 250.00	_ C.	,	1		Date of Receipt
Topeka KS 66611-1629 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Administrator, Capitol Strategies/KHA Receipt For: Primary General Amount of Each Receipt this Period 250.00		Mailing Address 2841 SW Plass Avenu	ıe		
FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Administrator, Capitol Strategies/KHA Receipt For: Primary General 250.00				Zip Code	Transaction ID: 14800371
Name of Employer Kansas Hospital Association Receipt For: Primary General Occupation Administrator, Capitol Strategies/KHA Aggregate Year-to-Date 250.00		<u>Topeka</u>	KS	66611-1629	Amount of Each Receipt this Period
Ransas Hospital Association On Receipt For: Primary General Administrator, Capitol Strategies/KHA Aggregate Year-to-Date 250.00			C		250.00
Receipt For: Primary General Aggregate Year-to-Date 750,00					Δ
Primary General			, '	· · · · · · · · · · · · · · · · · · ·	<u>`</u>
Other (specify) ▼ 250.00			, iggi egale		1
		Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			1012.50
TOTAL This Period (last page this line number only)	ı			<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 305 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		a coo or any pomoa committee to	
Full Name (Last, First, Middle Initial) Mr. Randall Peterson			Date of Receipt
Mailing Address 2022 N. Red Oaks			12 04 2007
City Wichita	State KS	Zip Code 67206-8909	Transaction ID: 14800372
FEC ID number of contributing federal political committee.	C	07200-0909	Amount of Each Receipt this Period 250.00
Name of Employer Via Christi Health System	Occupatio Senior V	n ice President	
Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Scott J Taylor			Date of Receipt
Mailing Address 1617 Crestway			12 04 2007
City Garden City	State KS	Zip Code 67846-6916	Transaction ID: 14800387
FEC ID number of contributing federal political committee.	C	07040-0910	Amount of Each Receipt this Period 500.00
Name of Employer St. Catherine Hospital	Occupatio Presiden	n t and Chief Executive Office	 r
Receipt For: Primary General Other (specify) ▼	·	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Samuel H Turner, , Sr.			Date of Receipt
Mailing Address 11408 Fontana Cou	rt		1 2 0 4 2 0 0 7
City	State	Zip Code	Transaction ID: 14800389
Leawood FEC ID number of contributing federal political committee.	C	66211-1344	Amount of Each Receipt this Period 185.00
Name of Employer Shawnee Mission Medical Center	Occupatio Chief Ex	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 310.00	
SUBTOTAL of Receipts This Page (optional			935.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to s	13 14 15 16 16 16 17 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 17 16 17 17 16 17
NAME OF COMMITTEE (In Full) American Hospital Association PAC	a.u aau oo o a a, pomoa oo	
Full Name (Last, First, Middle Initial) Mr Garren Colvin		Date of Receipt
Mailing Address 1 Medical Village Driv	е	12 05 2007
City	State Zip Code	Transaction ID: 14800414
Covington	KY 41017-3403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer St. Elizabeth Medical Cen-	Occupation Senior Vice President and Chief Finan	
ter-South Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Ms. Lori Latham	1	Date of Receipt
Mailing Address 1314 George Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800447
Lansing	MI 48910-1235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Michigan Health & Hospital Association	Occupation Director]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. David S. Finkbeiner	1	Date of Receipt
Mailing Address 85 Damon Road		M M / D D / Y Y Y Y Y Y 1 Y 1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14800456
<u>Haslett</u>	MI 48840-9747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Michigan Health & Hospital Association	Occupation Senior Vice President, Advocacy]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 305 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		areas of any political committee to	Solot Contributions from Scott Committees.
Full Name (Last, First, Middle Initial) Ms. Nancy McKeague			Date of Receipt
Mailing Address 952 Roxburgh Aven	iue		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City East Lansing	State MI	Zip Code 48823-3131	Transaction ID: 14800457 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		750.00
Name of Employer Michigan Health & Hospital Association	Occupation Senior V	n ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Ms. Kathy Coburn			Date of Receipt
Mailing Address 240 Canterbury Rd.			12 05 7 2007
City	State	Zip Code	Transaction ID: 14800487
Bloomfield Hills	MI	48304-2918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		175.00
Name of Employer St. Joseph Mercy Oakland	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Randy Oostra			Date of Receipt
Mailing Address 21 Tremore Way			12 05 2007
City	State	Zip Code	Transaction ID: 14800528
Holland FEC ID number of contributing federal political committee.	C	43528-9108	Amount of Each Receipt this Period 175.00
Name of Employer ProMedica Health System	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 425.00	
SUBTOTAL of Receipts This Page (optiona			1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persole name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Barbara J. Petee Mailing Address 4621 Beaconsfield Ct. City Toledo	State Zip Code OH 43623-3205	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer ProMedica Health System Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Vice President, Government Relations Aggregate Year-to-Date 425.00	175.00 s
Full Name (Last, First, Middle Initial) Ms. Sophie Womack Mailing Address 2310 W. McNichols City Detroit	State Zip Code MI 48221-3120	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Harper University Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Medical Affairs Aggregate Year-to-Date 350.00	350.00
Full Name (Last, First, Middle Initial) Mrs. Kathleen Harrelson Mailing Address 6181 Karabrook Court		Date of Receipt 1 2 0 5 2 0 0 7
City Kalamazoo FEC ID number of contributing federal political committee.	State Zip Code MI 49009-8961	Transaction ID: 14800564 Amount of Each Receipt this Period 205.00
Name of Employer Bronson Healthcare Group, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Vice President of Nursing Aggregate Year-to-Date 205.00	
SUBTOTAL of Receipts This Page (optional)	>	730.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John L. Jones, Jr. Mailing Address 1814 Hazel Avenue City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Kalamazoo FEC ID number of contributing federal political committee.	MI 49008-2844	Amount of Each Receipt this Period 205.00
Name of Employer Bronson Healthcare Group, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date 205.00	
Full Name (Last, First, Middle Initial) Ms. Cheryl Knapp Mailing Address 7183 Cross Country	y Drive	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800566
Kalamazoo	MI 49009-7588	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	205.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	
Full Name (Last, First, Middle Initial) Dr. William J Mayer, MD Mailing Address 3521 Whistling Ln.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800567
Portage FEC ID number of contributing federal political committee.	MI 49024-5513	Amount of Each Receipt this Period 205.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	
SUBTOTAL of Receipts This Page (optional	J	615.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 305 (check only one) X
\leftarrow	y information copied from such Reports and S or commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	
1 \	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr Milton McClurkan			Date of Receipt
-	Mailing Address 7480 Hidden Cove Pl.	01-1-	7'- 0-1-	12 05 2007
	City Kalamazoo	State MI	Zip Code 49009-8150	Transaction ID: 14800568 Amount of Each Receipt this Period
Ī	FEC ID number of contributing federal political committee.	C	43003-0130	205.00
Ī	Name of Employer Bronson Vicksburg Hospital	Occupation Vice Pres	n Sident Information Technolog	
Ī	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 205.00	
	Full Name (Last, First, Middle Initial) Ms. Sue Reinoehl			Date of Receipt
Ī	Mailing Address 8804 Weeping Pine Lr	1		12 05 7 9 9 9
(City	State	Zip Code	Transaction ID: 14800569
-	Kalamazoo	MI	49009-6733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		205.00
	Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice Pres		
l	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		205.00]
	Full Name (Last, First, Middle Initial) Mrs. Amy Barkholz			Date of Receipt
Ī	Mailing Address 905 Sanctuary Dr.			12 05 7 9 9 9
	City	State	Zip Code	Transaction ID: 14800570
	Mason	MI	48854-1390	Amount of Each Receipt this Period
1	FEC ID number of contributing federal political committee.	C		250.00
4	Name of Employer Michigan Health & Hospital Association		tor, Regulatory Issues	
•	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	JBTOTAL of Receipts This Page (optional)	l		660.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for co	ormation copied from such Reports and St ommercial purposes, other than using the IE OF COMMITTEE (In Full) erican Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Maili City Gra FEC feder Nam Sain	Name (Last, First, Middle Initial) David Baumgartner Ing Address 17 Prospect SE Ind Rapids ID number of contributing ral political committee. The of Employer the Mary's Health Care Sept For: Primary General Other (specify)		Zip Code 49503-4317 n ical Affairs e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14800571 Amount of Each Receipt this Period 250.00
Maili City Paw FEC feder Nam Lake	Name (Last, First, Middle Initial) Sally L Berglin ng Address P O Box 209 V Paw ID number of contributing ral political committee. e of Employer Eview Community Hospit- Seipt For: Primary General Other (specify)		Zip Code 49079-0209 n t and Chief Executive Officer e Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Dr. B Maili City Detr FEC feder Nam Harp	Name (Last, First, Middle Initial) brooks Bock, , M.D. ng Address 3990 John R Street Toit ID number of contributing ral political committee. e of Employer per University Hospital eipt For: Primary General Other (specify)	State MI C Occupation Presiden Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 5 2 0 0 7 Transaction ID: 14800573 Amount of Each Receipt this Period 250.00
SUBTO	DTAL of Receipts This Page (optional)			750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 305 (check only one) X 11a
or f	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 .	Full Name (Last, First, Middle Initial) Mr. James Bogan Mailing Address 500 Campus Drive City Hancock	State MI	Zip Code 49930-1569	Date of Receipt 1 2 0 5 2 0 0 7 Transaction ID: 14800574 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Portage Health Receipt For: Primary General		and Chief Executive Officer Year-to-Date ▼ 250.00	250.00
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul Bonis Mailing Address 615 South Bower Stree City	et State	Zip Code	Date of Receipt 1 2 0 5 2 0 0 7
	Greenville FEC ID number of contributing federal political committee. Name of Employer Spectrum Health-United Memorial	MI C Occupation	48838-2614	Transaction ID: 14800575 Amount of Each Receipt this Period 250.00
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
).	Full Name (Last, First, Middle Initial) Mr. Alan W Brass, , FACHE Mailing Address 1801 Richards Road			Date of Receipt 1 2 0 5 2 0 0 7
	City Toledo FEC ID number of contributing federal political committee.	State OH	Zip Code 43607-1037	Transaction ID: 14800576 Amount of Each Receipt this Period 250.00
	Name of Employer ProMedica Health System	Occupation Chief Exe	n ecutive Officer and President	t
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
sı	JBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 19 / 305 (check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mrs. Linda M Breakie			Date of Receipt
Mailing Address 7835 N. Ridge			1 2 0 5 2 0 0 7
City	State	Zip Code	Transaction ID: 14800577
Canton	MI	48187-1101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Complete Infusion Service	Occupation Trustee	n	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼	0 0	250.00]
Full Name (Last, First, Middle Initial) Mr. Paul Browne			Date of Receipt
Mailing Address 4275 Creedmore St.			12 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14800578
Commerce Twp	MI	48382-4034	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Trinity Health	Occupation Chief Info	n ormation Officer	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Lowell Bursch, M.D.			Date of Receipt
Mailing Address 6060 Woodmark NE			12 05 2007
City	State	Zip Code	Transaction ID: 14800579
Rockford	MI	49341-9443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Spectrum Health	Occupation Executive	n e Vice President Medical Aff	ai
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify)		250.00	
			750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	Statements may not be sold or used by any personance the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr John Byrnes		Date of Receipt
Mailing Address 1550 Thornapple Ri	ver Dr.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800580
Grand Rapids	MI 49546-9717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Spectrum Health	Occupation VP System Quality	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. K. Ross Childs		Date of Receipt
Mailing Address 6355 Franklin Wood	s Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800581
Traverse City	MI 49686-1966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer KR Consultant	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. John Collins		Date of Receipt
Mailing Address 1656 Seminole Rd.	SE	12 05 7 2007
City	State Zip Code	Transaction ID: 14800582
East Grand Rapids	MI 49506-6533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Mary's Health Care	Occupation VP and Chief Quality Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 305 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	γ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James M. Connelly Mailing Address 7123 Kennowy Col	urt		Date of Receipt
City West Bloomfield	State MI	Zip Code 48322-3276	Transaction ID: 14800583 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Henry Ford Health System	Occupation	n	250.00
Receipt For: Primary General Other (specify)		ice President and Chief Final Year-to-Date 250.00	nd]
Full Name (Last, First, Middle Initial) Mr. Rob Covert Mailing Address 200 North Madisor	n Street		Date of Receipt 1 2 0 5 2 0 0 7
City	State	Zip Code	Transaction ID: 14800585
Marshall	MI	49068-1143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Oaklawn Hospital Receipt For:		t and Chief Executive Officer	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas D DeFauw			Date of Receipt
Mailing Address 1221 Pine Grove A	Avenue		12 05 2007
City	State	Zip Code	Transaction ID: 14800586
Port Huron FEC ID number of contributing federal political committee.	C	48060-3511	Amount of Each Receipt this Period 250.00
Name of Employer Port Huron Hospital		t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Randy DeGroot		Date of Receipt
Mailing Address 274 East Chicago St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800587
Coldwater	MI 49036-2041	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Community Health Center of Branch Coun	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Vincent DiBattista		Date of Receipt
Mailing Address 20198 Morningside [Drive	12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800588
Grosse Pointe Wood	MI 48236-1834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Health	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. J. Joseph Diederich		Date of Receipt
Mailing Address 365 Windy Crest Dri	ve	12 05 YYYY 12007
City	State Zip Code	Transaction ID: 14800589
Ann Arbor	MI 48105-3014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Administrator]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Timothy J. Eckels Mailing Address 27870 Cabot Drive City Novi FEC ID number of contributing federal political committee. Name of Employer Trinity Health Receipt For:	State Zip Code MI 48377-2920 C Occupation Vice President, Public Policy	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800590 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 250.00	
Mr. Michael J Falatko Mailing Address 4675 Hill Street City	State Zip Code	Date of Receipt M M M
Cass City FEC ID number of contributing federal political committee.	MI 48726-1008	Amount of Each Receipt this Period 250.00
Name of Employer Hills and Dales General Hospital Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Dwight Gascho Mailing Address 170 North Caseville	e Road	Date of Receipt
City Pigeon	State Zip Code MI 48755-9704	Transaction ID: 14800592 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Scheurer Hospital Receipt For:	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	nl)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	13 14 15 16 on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	o name and address of any pointed committee to	
Full Name (Last, First, Middle Initial) Dr. Michael Geheb		Date of Receipt
Mailing Address 845 Lone Pine Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800593
Bloomfield Hills	MI 48302-2428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Sean Gehle		Date of Receipt
Mailing Address 328 W. Ottawa		12 05 7 9 9 9
City	State Zip Code	Transaction ID: 14800594
Lansing	MI 48933-1587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Health	Occupation Vice President, Advocacy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. John T. Hayden		Date of Receipt
Mailing Address PO Box 19368		12 05 7 9 9 9
City	State Zip Code	Transaction ID: 14800595
<u>Kalamazoo</u>	MI 49019-0368	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 305 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Wayne P Hellerstedt Mailing Address 502 West Harrie Si		Date of Receipt 1 2 0 5 2 0 0 7
City Newberry	State Zip Code MI 49868-1209	Transaction ID: 14800596 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Helen Newberry Joy Hospit- al	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Dennis R Herrick Mailing Address 1450 Redding	-	Date of Receipt
City	State Zip Code	1 2 0 5 2 0 0 7 Transaction ID: 14800597
<u>Birmingham</u>	MI 48009-1027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer William Beaumont Hospitals	Occupation Vice President and Chief Financial Off	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert Hoban		Date of Receipt
Mailing Address 911 Balfour		12 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Grosse Pointe Park	State Zip Code MI 48230-1815	Transaction ID: 14800598 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Health	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (options	al)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 305 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person to the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Ned B Hughes, , Jr. Mailing Address 212 South Sullivan	Street	Date of Receipt
City Fremont FEC ID number of contributing	State Zip Code MI 49412-1548	Transaction ID: 14800599 Amount of Each Receipt this Period 250.00
Name of Employer Gerber Memorial Health Services Receipt For: Primary Other (specify)	Occupation President Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth G. Hungerford Mailing Address 2471 Riveredge SE	 	Date of Receipt 1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14800600
Grand Rapids	MI 49546-7448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer ADAC Plastics, Inc.	Occupation Chairman	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Timothy J. Keener		Date of Receipt
Mailing Address 7034 Bennett Lake	Road	12 05 7 9 9 9
City	State Zip Code MI 48430-9005	Transaction ID: 14800601
Fenton FEC ID number of contributing federal political committee.	MI 48430-9005	Amount of Each Receipt this Period 250.00
Name of Employer Genesys Health System	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options	al)	750.00

SCHEDULE A (FEC ITEMIZED RECEIPT	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 305 (check only one) X
or for commercial purposes, otl	ner than using the name and ad	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (II American Hospital Asso	<i>'</i>		
Full Name (Last, First, Mido Dr. Mark A Kelley			Date of Receipt
	ovington Road	7'- 0-1-	12 05 2007
City Bloomfield Hills	State MI	Zip Code	Transaction ID: 14800602
FEC ID number of contribut federal political committee.		48301-2363	Amount of Each Receipt this Period 250.00
Name of Employer Henry Ford Health System	Occupation Executive	on ve Vice President	7
Receipt For: Primary Ger Other (specify) ▼	Aggregat	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Midd Mr. Roger Kerr	le Initial)		Date of Receipt
Mailing Address 1221 So	outh Drive		12 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14800603
Mount Pleasant	MI	48858-3234	Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.	C		250.00
Name of Employer Central Michigan Communi Hospital	dy Occupation Presider	on nt and Chief Executive Office	r
Receipt For:		e Year-to-Date ▼	
Primary Ger Other (specify) ▼	eral	250.00	
Full Name (Last, First, Midd Dr. Mark D. Kolins, MD	lle Initial)		Date of Receipt
Mailing Address 777 Ov	erhill Road		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bloomfield Village	State MI	Zip Code 48301-2571	Transaction ID: 14800604 Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.		1 1 1 1 1 1	250.00
Name of Employer Beaumont Hospital - Troy	Occupation Adminis		
Receipt For: Primary Ger Other (specify) ▼	""	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This	Page (optional)	\	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Thomas R Lemon			Date of Receipt
	Mailing Address 825 North Center Ave	nue		12 05 2007
	City Gaylord	State MI	Zip Code 49735-1592	Transaction ID: 14800605 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10,00	250.00
	Name of Employer Otsego Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. David M. Leonard Mailing Address 6383 Redington Drive	SE		Date of Receipt
				12 05 2007
	City Ada	State MI	Zip Code 49301-9021	Transaction ID: 14800606 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Spectrum Health	Occupation General		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Patrick McGuire			Date of Receipt
	Mailing Address 47430 Freedom Valle	у		1 2 0 5 2 0 0 7
	City	State MI	Zip Code	Transaction ID: 14800607
	Macomb FEC ID number of contributing federal political committee.	C	48044-2563	Amount of Each Receipt this Period 250.00
	Name of Employer St. John Health	Occupation Healthca		
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to s	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John A McVeety		Date of Receipt
Mailing Address 1501 West Chisholm S	treet	12 05 2007
City	State Zip Code	Transaction ID: 14800608
Alpena	MI 49707-1401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Alpena Regional Medical	Occupation	1
Center	Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Barbara Medvec		Date of Receipt
Mailing Address 5686 Briar Glen		1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14800609
Saline	MI 48176-9537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Chief Nursing Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Mosley		Date of Receipt
Mailing Address 101 Campan Cir. NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800610
Grand Rapids	MI 49503-2660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Spectrum Health	Occupation Vice President, Strategy & Business D	-
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00

TOTAL This Period (last page this line number only)

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 305 (check only one) X
or for cor	mation copied from such Reports and St nmercial purposes, other than using the E OF COMMITTEE (In Full) rican Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Sl	ame (Last, First, Middle Initial) nahin Motakef g Address 25727 Stonebridge Ave)		Date of Receipt 1 2 0 5 2 0 0 7
City		State	Zip Code	Transaction ID: 14800611
FEC	awan D number of contributing all political committee.	C	49071-7737	Amount of Each Receipt this Period 250.00
Recei	of Employer ess Health Alliance pt For: Primary General Other (specify)		e Vice President e Year-to-Date ▼ 250.00	
Mr. Re	ame (Last, First, Middle Initial) odney M Nelson g Address 220 Burdette Street			Date of Receipt 1 2 0 5 2 0 0 7
City		State	Zip Code	1 2 0 5 2 0 0 7 Transaction ID: 14800612
<u>Sain</u>	t Ignace	MI	49781-1712	Amount of Each Receipt this Period
federa	D number of contributing al political committee.	С		250.00
and F Recei	e of Employer inac Straits Hospital lealth C pt For: Primary General Other (specify)		n t and Chief Executive Office e Year-to-Date ▼ 250.00	r
	ame (Last, First, Middle Initial)			-
	ck Ohle g Address 4609 Congress			Date of Receipt 1 2 0 5 2 0 0 7
City		State	Zip Code	Transaction ID: 14800613
	and D number of contributing al political committee.	C	48642-3911	Amount of Each Receipt this Period 250.00
	of Employer ary's of Michigan	Occupatio Chief Op	n perating Officer	
	pt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Douglas E Pattullo Mailing Address 2463 South M-30 City West Branch FEC ID number of contributing federal political committee. Name of Employer West Branch Regional Medical Center Receipt For: Primary Other (specify)	State Zip Code MI 48661-1199 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800614 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Robert Riney Mailing Address 45989 Tournament City Northville FEC ID number of contributing federal political committee.	Drive State Zip Code MI 48167-9633	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Henry Ford Health System Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert B. Rosowski Mailing Address 17839 Stonebrook E City Northville FEC ID number of contributing	State Zip Code MI 48168-4330	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800616 Amount of Each Receipt this Period
federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	C Occupation Trustee Aggregate Year-to-Date ▼ 250.00	250.00
SUBTOTAL of Receipts This Page (optional)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 305 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary Rounding Mailing Address 22350 Banyan Hid	eaway Dr.		Date of Receipt
City Bonita Springs FEC ID number of contributing	State FL	Zip Code 34135-8151	Transaction ID: 14800617 Amount of Each Receipt this Period
federal political committee. Name of Employer Henry Ford Health System	Occupation Administr		250.00
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Schnettler Mailing Address 9120 Port Austin F	Road		Date of Receipt 1 2 0 5 2 0 0 7
City	State	Zip Code	Transaction ID: 14800618
Bay Port	MI	48720-9770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Hospital Council of East Central Michi Receipt For:	Occupation President Aggregate		
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. John Schon			Date of Receipt
Mailing Address 1721 South Stephe	enson Avenue		12 05 7 2007
City Iron Mountain	State MI	Zip Code 49801-3637	Transaction ID: 14800619 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	49001-3037	250.00
Name of Employer Dickinson County Healthca- re System Receipt For:		ator and Chief Executive Of Year-to-Date ▼	fi
Primary General Other (specify) ▼	33.13.10	250.00	
SUBTOTAL of Receipts This Page (option	al)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benorts at	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James J Sexton Mailing Address 2333 Biddle Avenue	e	Date of Receipt
City	State Zip Code	1 2 0 5 2 0 0 7 Transaction ID: 14800620
Wyandotte	MI 48192-4668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Henry Ford Wyandotte Hosp- ital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. George A Sharpe		Date of Receipt
Mailing Address 6615 Denham Ct. S	SE	M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City	State Zip Code	Transaction ID: 14800621
Grand Rapids FEC ID number of contributing federal political committee.	MI 49546-9757	Amount of Each Receipt this Period 250.00
Name of Employer Shage BMW	Occupation Trustee	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David Stephens	l	Date of Receipt
Mailing Address 220 Dean Ln.		12 05 2007
City	State Zip Code	Transaction ID: 14800622
Grosse Pointe Farm	MI 48236-3505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Hospital and Med- ical Center	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)	750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persorne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph M Tasse, , FACHE Mailing Address 27351 Dequindre City Madison Heights FEC ID number of contributing federal political committee. Name of Employer St. John Macomb-Oakland Hospital Oakla Receipt For: Primary Other (specify)	State Zip Code MI 48071-3487 C Occupation President Aggregate Year-to-Date 250.00	Date of Receipt M M J D D J Z D O 7 Transaction ID: 14800623 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Henry A Veenstra Mailing Address 8333 Felch Street City Zeeland FEC ID number of contributing federal political committee. Name of Employer Zeeland Community Hospital Receipt For: Primary General	State Zip Code MI 49464-1698 C Occupation President Aggregate Year-to-Date	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Patrick R Wardell Mailing Address One Hurley Plaza City Flint FEC ID number of contributing federal political committee. Name of Employer	250.00 State Zip Code MI 48503-5902 C Occupation	Date of Receipt 1 2
Hurley Medical Center Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	President and Chief Executive Officer Aggregate Year-to-Date 250.00 ■	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mike Way		Date of Receipt
Mailing Address 7049 Turkey Glen Tr		12 05 7 2007
City	State Zip Code MI 49009-7031	Transaction ID: 14800626
Kalamazoo FEC ID number of contributing federal political committee.	MI 49009-7031	Amount of Each Receipt this Period 250.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Mr Douglas D Welday		Date of Receipt
Mailing Address 32468 Sandstone Ct		12 05 YYYY 2007
City	State Zip Code	Transaction ID: 14800627
Farmington Hills	MI 48334-4321	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Executive Vice President and CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Mary Lou Wesley		Date of Receipt
Mailing Address 5301 East Huron Riv	ver Drive	12 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800628
Ypsilanti FEC ID number of contributing	MI 48197-1051	Amount of Each Receipt this Period
federal political committee.	C	250.00
Name of Employer St. Joseph Mercy Hospital	Occupation Chief Nursing Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
	er only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36/305 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Kenneth F Wilhelm			Date of Receipt
Mailing Address 1100 South Van Dy	yke Road		12 05 YYYYY 12 05 2007
City Bad Axe	State MI	Zip Code 48413-9615	Transaction ID: 14800629 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Huron Medical Center	Occupation Presiden	n t and Chief Executive Office	,
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mary Zatina			Date of Receipt
Mailing Address 605 Chicago Boule	vard		12 05 2007
City Detroit	State MI	Zip Code 48202-1414	Transaction ID: 14800630 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10202 1717	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation SVP. Go	n v't Rel, Corp Planning & Cor	nmun
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mary Zuckerman			Date of Receipt
Mailing Address 19721 Gary Lane			12 05 2007
City	State	Zip Code	Transaction ID: 14800631
Livonia FEC ID number of contributing federal political committee.	C	48152-1168	Amount of Each Receipt this Period 250.00
Name of Employer Detroit Medical Center	Occupation Deputy C		1
Receipt For: Primary General Other (specify) ▼	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements man	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. James B. Falahee, Jr.			Date of Receipt
Mailing Address 7463 Cottage Oak Dr	rive		1 2 0 5 2 0 0 7
City Portage	State MI	Zip Code 49024-2352	Transaction ID: 14800632 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10024 2002	287.50
Name of Employer Bronson Healthcare Group, Inc. Receipt For: Primary General Other (specify) ▼	_ '	n P, Legal/Legislative Relation e Year-to-Date ▼ 287.50	s S
Full Name (Last, First, Middle Initial) Mr. Scott D. Larson, MD Mailing Address 1531 Academy Stree	t		Date of Receipt 1 2 0 5 2 0 0 7
City	State	Zip Code	Transaction ID: 14800633
Kalamazoo	MI	49006-4400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		287.50
Name of Employer Bronson Healthcare Group, Inc.	Occupatio Vice Pre		
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼		287.50	
Full Name (Last, First, Middle Initial) Ms. Camille Shy			Date of Receipt
Mailing Address 13200 Cambridge Co	ourt		1 2 0 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14800634
Plymouth FEC ID number of contributing federal political committee.	C	48170-3099	Amount of Each Receipt this Period 300.00
Name of Employer St. Joseph Mercy Hospital	Occupatio Vice Pre		
Receipt For:	- ' '	e Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
SUBTOTAL of Receipts This Page (optional)	1		875.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carol Stoll Mailing Address 7630 Laurie Lane N City Saginaw FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center Receipt For: Primary General	State Zip Code MI 48609-4909 C Occupation Vice President, Chief Nursing Officer Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800635 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. Peter Karadjoff Mailing Address 304 Fairway Court City St. Clair FEC ID number of contributing federal political committee. Name of Employer Mercy Hospital Receipt For:	State Zip Code MI 48079-3570 C Occupation President & CEO Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800636 Amount of Each Receipt this Period 320.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Kenneth L Taft Mailing Address 2964 East T Ave. City Portage FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group, Inc. Receipt For:	State Zip Code MI 49002-7533 C Occupation Executive Vice President and COO Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800637 Amount of Each Receipt this Period 325.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	325.00	945.00

or fo	information copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A	American Hospital Association PAC Full Name (Last, First, Middle Initial)			
A . <u>1</u>				
I.	Mr. Kevin Cawley			Date of Receipt
-	Mailing Address 11803 Silverspring Dr.			12 05 2007
_	City Dewitt	State MI	Zip Code 48820-7731	Transaction ID: 14800638
- F	FEC ID number of contributing ederal political committee.	C	40020-7731	Amount of Each Receipt this Period 340.00
- N	Jame of Employer Sheridan Community Hospit- al	Occupation Chief Exe	ecutive Officer	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 340.00	
B. <u>1</u>	Full Name (Last, First, Middle Initial) Mr. Jack L Denton Mailing Address P O Box 130			Date of Receipt
_				12 05 2007
	City Eaton Rapids	State MI	Zip Code 48827-0130	Transaction ID: 14800639 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	40027 0100	375.00
<u>e</u>	lame of Employer Eaton Rapids Medical Cent- er	Occupation President	n and Chief Executive Office	r
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00]
	Full Name (Last, First, Middle Initial) Mr. J. Patrick Dyson			Date of Receipt
N	Mailing Address P.O. Box 51167			1 2 0 5 2 0 0 7
	Dity	State	Zip Code	Transaction ID: 14800640
F	Kalamazoo FEC ID number of contributing ederal political committee.	C	49005-1167	Amount of Each Receipt this Period 375.00
P F	lame of Employer Borgess Health Alliance	Occupation Executive	n e Vice President	
F	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 375.00	
su	BTOTAL of Receipts This Page (optional)			1090.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any i	nformation copied from such Reports and S commercial purposes, other than using the	Statements may name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	AME OF COMMITTEE (In Full) .merican Hospital Association PAC			
. <u>D</u>	ull Name (Last, First, Middle Initial) r. Douglas Edema, MD			Date of Receipt
	ailing Address 1323 Carston Lane			12 05 2007
	ity Chelsea	State MI	Zip Code 48118-2106	Transaction ID: 14800641 Amount of Each Receipt this Period
FI	EC ID number of contributing deral political committee.	C		375.00
Ni Si	ame of Employer aint Joseph Mercy Living- ton Hospital	Occupation Vice Pres		
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. Daniel G Hale			Date of Receipt
M	ailing Address 27870 Cabot Drive			12 05 2007
	ity	State	Zip Code	Transaction ID: 14800642
FI	lovi EC ID number of contributing deral political committee.	C	48377-2920	Amount of Each Receipt this Period 375.00
N. T	ame of Employer rinity Health	Occupation Senior Vic	ce President and Corporate	· Cp
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	ull Name (Last, First, Middle Initial) r. James Kure			Date of Receipt
M	ailing Address 10140 Halsey Road			12 05 YYYYY 12 05 2007
	ity Grand Blanc	State MI	Zip Code 48439-8208	Transaction ID: 14800643
FI	EC ID number of contributing deral political committee.	C	40433-0200	Amount of Each Receipt this Period 375.00
R	ame of Employer egional Cardiology Assoc- tes	Occupation Administra		
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUE	BTOTAL of Receipts This Page (optional)	1		1125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Ms. Andrea R. Price, , FACHE			Date of Receipt
Mailing Address 2024 Timberview Dr	·.		12 05 2007
City Okemos	State MI	Zip Code 48864-5998	Transaction ID: 14800644 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000 1000	375.00
Name of Employer Sparrow Hospital	Occupation Administ		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. Randall J Wagner	I		Date of Receipt
Mailing Address 4691 Old Grand Riv	er Tr		12 05 YYYYY 12 05
City Ada	State MI	Zip Code 49301-8614	Transaction ID: 14800645
FEC ID number of contributing federal political committee.	C	49301-0014	Amount of Each Receipt this Period 375.00
Name of Employer Saint Mary's Health Care	Occupation COO	n	
Receipt For: Primary General Other (specify) ▼	'	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. Samuel Yamin			Date of Receipt
Mailing Address 5532 Lakeview Dr.			1 2 0 5 2 0 0 7
City Bloomfield	State MI	Zip Code 48302-2728	Transaction ID: 14800646 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000E E7 E0	375.00
Name of Employer Whitlock Business Group	Occupation Trustee	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	\\		1125.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. Steve Minn, MD		Date of Receipt
Mailing Address 580 College Ave. C/O Radiology Dept.		12 05 2007
City	State Zip Code	Transaction ID: 14800647
Marquette	MI 49855-2705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Marquette General Health System	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Mr. Charles D. Kohlruss	1	Date of Receipt
Mailing Address 946 Meadow Lark Co.	urt	12 05 YYYY 12 05
City	State Zip Code	Transaction ID: 14800648
Holland	MI 49424-6602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	420.00
Name of Employer Holland Hospital	Occupation Vice President, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) Mr. Mark Pawlak	1	Date of Receipt
Mailing Address 15277 Meadowwood		12 / 05 / Y Y Y Y
City	State Zip Code	Transaction ID: 14800649
Grand Haven	MI 49417-9684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	420.00
Name of Employer Holland Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
SURTOTAL of Receipts This Page (ontional)		1240.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dale Sowders Mailing Address 602 Michigan Avenue City Holland FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify)	State Zip Code MI 49423-4918 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 420.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Terry L Steele Mailing Address 602 Michigan Avenue City Holland FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify)	State Zip Code MI 49423-4918 C Occupation Vice President Finance and Chief Final Aggregate Year-to-Date 420.00	Date of Receipt 12 05 2007 Transaction ID: 14800651 Amount of Each Receipt this Period 420.00
Full Name (Last, First, Middle Initial) Mrs. Patti VanDort Mailing Address 2629 Florial Drive City Zeeland FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify)	State Zip Code MI 49464-9107 C Occupation Vice President Nursing/Chief Nursing Aggregate Year-to-Date 420.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14800652 Amount of Each Receipt this Period 420.00
SUBTOTAL of Receipts This Page (optional)	>	1260.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Laura D. Appel Mailing Address 224 Vicksburg		Date of Receipt 1 2 0 5 2 0 0 7
City Lansing	State Zip Code MI 48917-9607	Transaction ID: 14800653 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Director, Legislative Policy Aggregate Year-to-Date 500.00]
Full Name (Last, First, Middle Initial) Dr. David E. Blair, MD Mailing Address 7417 Old Lantern E	Or. SE	Date of Receipt 1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14800654
Caledonia	MI 49316-9004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Saint Mary's Health Care	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard C Breon	•	Date of Receipt
Mailing Address 100 Michigan Stree		12 05 2007
City <u>Grand Rapids</u>	State Zip Code MI 49503-2560	Transaction ID: 14800655 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Spectrum Health	Occupation President and Chief Executive Officer	<u></u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional		1500.00

SCHEDULE A ITEMIZED REC	(FEC Form 3X) EIPTS	Use separate for each categ Detailed Sumr	schedule(s) ory of the	FOR LINE NUMBER: PAGE 45 / 305 (check only one) X
or for commercial purpo	ses, other than using the nam	nents may not be sold or us e and address of any polition	sed by any person to all committee to so	for the purpose of soliciting contributions licit contributions from such committee.
Full Name (Last, Fir Mr. Brian M Connolly Mailing Address (st, Middle Initial) One Parklane Blvd, Ste 10	00E		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code		Transaction ID: 14800656
<u>Dearborn</u> FEC ID number of c federal political com		MI 48126-4241 C	U B	Amount of Each Receipt this Period 500.00
Name of Employer Oakwood Healthcar Receipt For: Primary Other (specify	General F	Occupation President and Chief Exe Aggregate Year-to-Date ▼	ecutive Officer	
Full Name (Last, Fir Mr. Michael Duggan Mailing Address 3	st, Middle Initial) 990 John R Street			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code		Transaction ID: 14800657
Detroit FEC ID number of of federal political com		MI 48201-2018 C	•	Amount of Each Receipt this Period 500.00
Name of Employer Detroit Medical Cen	or	Occupation President and Chief Exe	ecutive Officer	
Receipt For: Primary Other (specify	General	Aggregate Year-to-Date ▼	500.00	
Full Name (Last, Fir	st, Middle Initial)			Date of Receipt
	09 N. Fourth Street			12 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code		Transaction ID: 14800658
Ann Arbor FEC ID number of of federal political com		MI 48104-1003	U	Amount of Each Receipt this Period 500.00
Name of Employer Saint Joseph Mercy Hospital	Saline C	Occupation Director		
Receipt For: Primary Other (specify	General	Aggregate Year-to-Date ▼	500.00	
SUBTOTAL of Receip	ts This Page (optional)			1500.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 305 (check only one) X 11a 11b 11c 12
or for commercial purposes, other than u	s and Statements may not be sold or used by any perso sing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association Full Name (Last, First, Middle Initial)	PAC	T
Mr. Garry C Faja Mailing Address 620 Byron Roac	I	Date of Receipt 1 2 0 5 2 0 0 7
City <u>Howell</u>	State Zip Code MI 48843-1002	Transaction ID: 14800659 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Saint Joseph Mercy Living- ston Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Gerald D Fitzgerald Mailing Address 18 Millrace Ct.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800660
<u>Dearborn</u>	MI 48126-4241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Georgia R Fojtasek		Date of Receipt
Mailing Address 205 North East		12 / 05 / 2007
City Jackson	State Zip Code MI 49201-1753	Transaction ID: 14800661 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Foote Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (opt	ional)	1500.00
TOTAL This Period (last page this line	number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 305 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Charles Hoffman Mailing Address 2440 Antietam Drive City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer St. Joseph Mercy Hospital Receipt For: Primary General	State Zip Code MI 48105-1471 C Occupation Chief Financial Officer Aggregate Year-to-Date	Date of Receipt 1 2 0 5 2 0 0 7 Transaction ID: 14800662 Amount of Each Receipt this Period 500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William Jackson Mailing Address 14700 Lake Shore Driv City Charlevoix	7e State Zip Code MI 49720-1931	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Charlevoix Area Hospital Receipt For: Primary General Other (specify)	C Occupation President Aggregate Year-to-Date ▼	500.00
Full Name (Last, First, Middle Initial) Mr. David B. Jahn Mailing Address 3174 S. Woodfield Blv Apt. 136 City Sault Sainte Marie	d. State Zip Code MI 49783-9432	Date of Receipt 1 2 0 5 2 0 0 7 Transaction ID: 14800664 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer War Memorial Hospital Receipt For:	Occupation Hospital CEO Aggregate Year-to-Date ▼	500.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	500.00	1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A.	Full Name (Last, First, Middle Initial) Mr. Spencer Johnson			Date of Receipt
	Mailing Address 2066 Riverwood Drive			12 05 2007
	City	State MI	Zip Code	Transaction ID: 14800665
	Okemos FEC ID number of contributing federal political committee.	C	48864-2814	Amount of Each Receipt this Period 500.00
	Name of Employer Michigan Health & Hospital Association	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Elliot Joseph	<u> </u>		Date of Receipt
	Mailing Address 731 S. Bates			12 05 7 2007
	City	State	Zip Code	Transaction ID: 14800666
	Birmingham FEC ID number of contributing federal political committee.	C	48009-1955	Amount of Each Receipt this Period 500.00
	Name of Employer St. John Health	Occupation President	& Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
— C.	Full Name (Last, First, Middle Initial) Dr. Milind Karve, M.D.			Date of Receipt
	Mailing Address 2021 Timberview Driv	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Okemos	State MI	Zip Code 48864-5999	Transaction ID: 14800667 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	+000+-0333	500.00
	Name of Employer Sparrow Hospital	Occupation Administra		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
5	SUBTOTAL of Receipts This Page (optional)			1500.00
	OTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 305 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Donald C Kooy Mailing Address 401 South Ballenge	er Highway	Date of Receipt
City Flint FEC ID number of contributing	State Zip Code MI 48532-3638	1 2 0 5 2 0 0 7 Transaction ID: 14800668 Amount of Each Receipt this Period
Name of Employer McLaren Regional Medical Center Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul E. LaCasse, , DO Mailing Address 6520 Commerce Fill City	Road State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
West Bloomfield FEC ID number of contributing federal political committee. Name of Employer Botsford Hospital Receipt For: □ Primary □ General Other (specify) ▼	Occupation President & Chief Executive Officer Aggregate Year-to-Date 500.00	Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Jim Lee Mailing Address 803 Greenwich Dri	ve	Date of Receipt 1 2 0 5 2 0 0 7
City Grand Ledge FEC ID number of contributing federal political committee.	State Zip Code MI 48837-2411	Transaction ID: 14800670 Amount of Each Receipt this Period 500.00
Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify)	Occupation VP, Corporate Information Services Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (option	al)	1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ .	Full Name (Last, First, Middle Initial) Mr. Paul B. Lerg Mailing Address P.O. Box 332 City Grayling FEC ID number of contributing	State Zip Code MI 49738-8787	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify)	Occupation Trustee Aggregate Year-to-Date 500.00	
 3.	Full Name (Last, First, Middle Initial) Ms. Marilyn Litka-Klein Mailing Address 16930 Pine Hollow Dri	ve	Date of Receipt 1 2 0 5 2 0 0 7
	City East Lansing FEC ID number of contributing federal political committee.	State Zip Code MI 48823-9664 C	Transaction ID: 14800672 Amount of Each Receipt this Period 500.00
	Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Sr. Director, Health Finance Aggregate Year-to-Date ▼ 500.00	
 ;.	Full Name (Last, First, Middle Initial) Mr. Spencer Maidlow Mailing Address 1447 North Harrison S	treet	Date of Receipt
	City Saginaw	State Zip Code MI 48602-4727	Transaction ID: 14800673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center	Occupation President and Chief Executive Officer	500.00
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
5	SUBTOTAL of Receipts This Page (optional)	······	1500.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 51 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold e name and address of any	or used by any perso political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Dr Rolland Mambourg, , M.D.			Date of Receipt
	Mailing Address 1690 Waterside Ct.			12 05 2007
	City Ann Arbor	State Zip Cod MI 48108-		Transaction ID: 14800674 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer St. Joseph Mercy Hospital	Occupation Vice President Physical President Physical President Physical Ph	sician Services	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	te ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Kenneth J Matzick	ila Dand		Date of Receipt
	Mailing Address 3601 West Thirteen M	12 05 7 2007		
	City Royal Oak	State Zip Cod MI 48073-		Transaction ID: 14800675
	FEC ID number of contributing federal political committee.	C 40073	0703	Amount of Each Receipt this Period 500.00
	Name of Employer William Beaumont Hospitals	Occupation President and Chie	f Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	500.00	
 C.	Full Name (Last, First, Middle Initial) Mr. Philip H McCorkle, , Jr.			Date of Receipt
	Mailing Address 200 Jefferson Avenue	SE		12 05 YYYYY 12 05 2007
	City Grand Rapids	State Zip Coo MI 49503-		Transaction ID: 14800676
	FEC ID number of contributing federal political committee.	MI 49503-	-4502	Amount of Each Receipt this Period 500.00
	Name of Employer Saint Mary's Health Care	Occupation President and Chie	f Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Dat	te ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1500.00
	FOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to s	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		SOLOTION CONTINUES.
Full Name (Last, First, Middle Initial) Mr. Patrick Murtha		Date of Receipt
Mailing Address P O Box 659		12 05 2007
City	State Zip Code	Transaction ID: 14800677
Tawas City	MI 48764-0659	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Joseph Health System	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Mark S O'Halla		Date of Receipt
Mailing Address 1000 Harrington Bou	ulevard	12 05 7 2007
City	State Zip Code	Transaction ID: 14800678
Mount Clemens	MI 48043-2920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mount Clemens Regional Me- dical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. John C. Render		Date of Receipt
Mailing Address 11148 Valeside Cres	3.	1 2 0 5 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14800679
Carmel	IN 46032-9158	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hall, Render, Killian, He- ath & Lyman	Occupation General Counsel]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
)	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mrs. Kathleen Rhine Mailing Address 1228 Waterways Dr. City Ann Arbor FEC ID number of contributing federal political committee.	State Zip Code MI 48108-2782	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800680 Amount of Each Receipt this Period 500.00
Name of Employer St. Joseph Mercy Hospital Receipt For: Primary General Other (specify) ▼	Occupation VP - Administration Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Frank J Sardone Mailing Address One Healthcare Plaz	za	Date of Receipt 1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14800681
Kalamazoo FEC ID number of contributing federal political committee.	MI 49007-5339	Amount of Each Receipt this Period 500.00
Name of Employer Bronson Healthcare Group, Inc. Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael A. Slubowski Mailing Address 43515 Vero Court	_ 	Date of Receipt
City	State Zip Code	1 2 0 5 2 0 0 7 Transaction ID: 14800682
Northville	MI 48167-8975	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Trinity Health	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Paul A Spaude, , FACHE		Date of Receipt
Mailing Address 1521 Gull Road		12 05 2007
City Kalamazoo	State Zip Code MI 49048-1640	Transaction ID: 14800683 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Borgess Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Roger Spoelman		Date of Receipt
Mailing Address 1500 East Sherman E	souievard	12 05 7 2007
City	State Zip Code	Transaction ID: 14800684
Muskegon	MI 49444-1849	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mercy General Health Part- ners	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Strong		Date of Receipt
Mailing Address 1500 East Medical Ce	nter Drive	12 DD YYYYY 12 05 2007
City	State Zip Code MI 48109-0999	Transaction ID: 14800685
Ann Arbor FEC ID number of contributing federal political committee.	MI 48109-0999	Amount of Each Receipt this Period 500.00
Name of Employer University of Michigan Ho- spitals and H	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .		1500.00
TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 305 (check only one) X 11a
C	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may n	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Dennis A Swan Mailing Address P O Box 30480			Date of Receipt
			7. 0.1	12 05 2007
	City Lansing	State MI	Zip Code 48909-7980	Transaction ID: 14800686 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Sparrow Hospital	Occupation President a	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Terence A. Thomas	<u> </u>		Date of Receipt
	Mailing Address 18214 Parkside			12 05 2007
	City Detroit	State MI	Zip Code 48221-2727	Transaction ID: 14800687
	FEC ID number of contributing federal political committee.	C	40221-2727	Amount of Each Receipt this Period 500.00
	Name of Employer St. John Health	Occupation Senior Vice	e President, External Affair	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00]
_ c.	Full Name (Last, First, Middle Initial) Mr. Matthew G VanVranken			Date of Receipt
	Mailing Address 5669 Watermark Ct.	SE		1 2 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Grand Rapids	State MI	Zip Code 49546-6487	Transaction ID: 14800688
	FEC ID number of contributing federal political committee.	C	49040-0407	Amount of Each Receipt this Period 500.00
	Name of Employer Spectrum Health	Occupation Healthcare	Administration	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1500.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph A Wasserman Mailing Address 6418 Dean's Hill Ro. City Berrien Center FEC ID number of contributing federal political committee. Name of Employer Lakeland Specialty Hospital, Berrien C Receipt For: Primary General Other (specify)	State Zip Code MI 49102-9750 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800689 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Jack Weiner Mailing Address 44405 Woodward A City Pontiac FEC ID number of contributing federal political committee. Name of Employer St. Joseph Mercy Oakland Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800690 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Ms. Fleury Yelvington Mailing Address 28 W. Hannum Blvd City Saginaw FEC ID number of contributing federal political committee. Name of Employer St. Mary's of Michigan Receipt For: Primary General Other (specify)	State Zip Code MI 48602-1949 C Occupation President/CEO Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14800691 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional) >	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	•)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57/305 (check only one)	
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)	the name and add	aress of arry political committee to	Solicit Contributions from Such Continues.	
American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. Clark Ballard			Date of Receipt	
Mailing Address 1601 Willoughby Ro	oad		12 05 YYYYY 12 05 2007	
City	State	Zip Code	Transaction ID: 14800692	
Mason	MI	48854-9435	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		750.00	
Name of Employer Michigan Health & Hospital Association	Occupation Group Vi	n Ice President		
Receipt For:		e Year-to-Date ▼		
Primary General Other (specify) ▼		750.00]	
Full Name (Last, First, Middle Initial) Mr. Gregory R. Lane			Date of Receipt	
Mailing Address 1596 South Hill Circ	cle		12 05 2007	
City				
Bloomfield	MI	48304-1121	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		750.00	
Name of Employer McLaren Health Care Corpo- ration	Occupation Sr. Vice	n President		
Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼		750.00		
Full Name (Last, First, Middle Initial) Mr. Brian Peters			Date of Receipt	
Mailing Address 3051 Crofton Dr.			1 2 0 5 2 0 0 7	
City	State	Zip Code	Transaction ID: 14800694	
Dewitt	MI	48820-7770	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		750.00	
Name of Employer Michigan Health & Hospital Association	Occupation Senior C	n orporate Vice President		
Receipt For:		e Year-to-Date ▼		
Primary General Other (specify) ▼		750.00		
			2250.00	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 305 (check only one) X
0	any information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Ms. Barbara Rossmann Mailing Address 45055 10 Mile Pearl			Date of Receipt
	Mailing Address 15855 19 Mile Road		7: 0 1	12 05 2007
	City Clinton Township	State MI	Zip Code 48038-3504	Transaction ID: 14800695 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		750.00
	Name of Employer Henry Ford Macomb Hospital	Occupation President	n t and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
 3.	Full Name (Last, First, Middle Initial) Ms. Nancy M Schlichting	1		Date of Receipt
	Mailing Address One Ford Place			12 / 05 / 2007
	City Detroit	State MI	Zip Code	Transaction ID: 14800696
	FEC ID number of contributing federal political committee.	C	48202-3450	Amount of Each Receipt this Period 750.00
	Name of Employer Henry Ford Health System	Occupation Presiden	n t and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Mr. David Seaman			Date of Receipt
	Mailing Address 805 Ledge Moor Blvd.			12 05 2007
	City Grand Ledge	State MI	Zip Code	Transaction ID: 14800697
	FEC ID number of contributing federal political committee.	C	48837-2037	Amount of Each Receipt this Period 750.00
	Name of Employer Michigan Health & Hospital Association	, '	e Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional) .	1		2250.00

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 305 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>		
Full Name (Last, First, Middle Initial) Mr. Mark R Taylor			Date of Receipt
Mailing Address 16 Dodge Place			1 2 0 5 2 0 0 7
City	State	Zip Code	Transaction ID: 14800698
Grosse Pointe FEC ID number of contributing federal political committee.	C	48230-1939	Amount of Each Receipt this Period 750.00
Name of Employer Genesys Health System	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. Daniel L Wakeman			Date of Receipt
Mailing Address 718 North Macomb	12 05 7 7 7 7 7		
City Monroe	State MI	Zip Code 48162-7815	Transaction ID: 14800699
FEC ID number of contributing federal political committee.	C	40102-7013	Amount of Each Receipt this Period 500.00
Name of Employer Mercy Memorial Hospital System	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Mark Steadham			Date of Receipt
Mailing Address 803 Poplar Street			12 06 2007
City Murray	State KY	Zip Code	Transaction ID: 14807709
FEC ID number of contributing federal political committee.	C	42071-2432	Amount of Each Receipt this Period 300.00
Name of Employer Murray-Calloway County Ho- spital		sident Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option:	al)		1550.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	ry of the	FOR LINE NUMBER: PAGE 60 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or use name and address of any politica	d by any person	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Warren Tardy			Date of Receipt
	Mailing Address 310 25th Avenue Nortl Suite 101			12 05 2007
	City	State Zip Code		Transaction ID: 14813215
	Nashville	TN 37203-1515		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer HCA	Occupation Director, Public Policy Ma	anagement Gr	p
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Wayne A. Smith			Date of Receipt
	Mailing Address 1280 South Governors	12 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State Zip Code		Transaction ID: 14813318
	Dover	DE 19904-4802		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Delaware Healthcare Assoc- iation	Occupation President & CEO		
	Receipt For: Primary General	Aggregate Year-to-Date ▼		
	Other (specify)		500.00	
_ c.	Full Name (Last, First, Middle Initial) Mr. Dennis E Klima			Date of Receipt
	Mailing Address 640 South State Stree			1 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 14813319
	Dover	DE 19901-3597		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		625.00
	Name of Employer Bayhealth Medical Center	Occupation President and Chief Exec	utive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	725.00	
	SUBTOTAL of Receipts This Page (optional)			1375.00
	TOTAL This Period (last page this line number		·	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert A. Malson		Date of Receipt
Mailing Address 1850 Redwood Terra	,	12 05 2007
City Washington	State Zip Code DC 20012-1023	Transaction ID: 14813426 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer District of Columbia Hosp- ital Associat	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Jeanette G Clough		Date of Receipt
Mailing Address 330 Mount Auburn St	reet	12 06 2007
City	State Zip Code	Transaction ID: 14813430
Cambridge	MA 02138-5502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mount Auburn Hospital	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Daniel P Moen		Date of Receipt
Mailing Address 242 Green Street		1 2 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14813431
Gardner	MA 01440-1336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Heywood Hospital	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
CURTOTAL of Descints This Dags (antique)		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 305 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Susan L Davis, , R.N., Ed Mailing Address 2800 Main Street City Bridgeport FEC ID number of contributing federal political committee. Name of Employer St. Vincent's Medical Center Receipt For: Primary General Other (specify)	State Zip Code CT 06606-4292 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Peter B Davis Mailing Address 172 Kinsley Street City Nashua FEC ID number of contributing federal political committee. Name of Employer St. Joseph Hospital Receipt For: Primary General Other (specify)	State Zip Code NH 03060-3648 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 6 2 0 0 7 Transaction ID: 14813687 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Danny Chun Mailing Address 303 North Oak Par City Oak Park FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify)	State Zip Code IL 60302-2189 C Occupation Vice President, Communications Aggregate Year-to-Date 250.00	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	al)	875.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than unlike NAME OF COMMITTEE (In Full) American Hospital Association	is and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Brad Copple Mailing Address P O Box 707 City	State Zip Code	Date of Receipt 1 2 1 2 2 0 0 7 Transaction ID: 14818075
Dekalb FEC ID number of contributing federal political committee.	IL 60115-0707	Amount of Each Receipt this Period 250.00
Name of Employer Kishwaukee Community Hosp- ital Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James Dan Mailing Address 511 Forest Mew	'S	Date of Receipt 1 2 1 2 2 0 0 7
City Oak Brook FEC ID number of contributing federal political committee.	State Zip Code IL 60523-2643 C	Transaction ID: 14818077 Amount of Each Receipt this Period 500.00
Name of Employer Advocate Health Care	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard B Floyd Mailing Address 934 Center Stre	et	Date of Receipt 1 2 1 2 2 0 0 7
City Elgin	State Zip Code IL 60120-2198	Transaction ID: 14820531 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Sherman Hospital Receipt For:	Occupation President and Chief Executive Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 392.00	
SUBTOTAL of Receipts This Page (opt	ional)	1125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Mark R Neaman Mailing Address 1301 Central Stree City	t State Zip Code	Date of Receipt 1 2 1 2 2 0 0 7 Transaction ID: 14820537
Evanston FEC ID number of contributing federal political committee.	IL 60201-1613	Amount of Each Receipt this Period 500.00
Name of Employer Evanston Northwestern Hea- Ithcare Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Kevin P Poorten Mailing Address P O Box 707	'	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14820538
<u>Dekalb</u>	IL 60115-0707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kish Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.50	
Full Name (Last, First, Middle Initial) Mr. Daniel P. Schmidt Mailing Address 8 Andrew Court	'	Date of Receipt 1 2 1 2 2 0 0 7
City	State Zip Code	Transaction ID: 14820542
Burr Ridge FEC ID number of contributing federal political committee.	IL 60527-8128	Amount of Each Receipt this Period 250.00
Name of Employer Advocate Health Care	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 305 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carol Schmidtgall Mailing Address 1250 Autumn Ridge City Morton FEC ID number of contributing federal political committee. Name of Employer OSF Saint Francis Medical Center	State Zip Code IL 61550-3160 C Occupation Administrator	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Daniel J Woods Mailing Address 503 North Maple Str	eet	Date of Receipt 1 2 1 2 2 0 0 7
City	State Zip Code	Transaction ID: 14820545
<u>Effingham</u>	IL 62401-2099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	153.50
Name of Employer St. Anthony's Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Admini Aggregate Year-to-Date 278.50	str
Full Name (Last, First, Middle Initial) Mr. Mark A Frey		Date of Receipt
Mailing Address 1650 Moon Lake Bo	ulevard	12 12 2007
City	State Zip Code	Transaction ID: 14820648
Hoffman Estates	IL 60194-1010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Alexian Brothers Behavior- al Health Hos Receipt For:	Occupation President and Chief Executive Office	r
Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Descripts This Descriptional		653.50

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 305 (check only one) X 11a
or for comme	on copied from such Reports and St rcial purposes, other than using the COMMITTEE (In Full) n Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms. Lynn E	(Last, First, Middle Initial) 3. Nicholas, FACHE Idress Five New England Exec	cutive Park		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	an .	State	Zip Code	Transaction ID: 14820779
	umber of contributing litical committee.	C	01803-5010	Amount of Each Receipt this Period 1000.00
sociation Receipt Fo		-	t and Chief Executive Office e Year-to-Date T	r
Mr. Robert	(Last, First, Middle Initial) T. Clarke Idress 800 North Rutledge Str	eet		Date of Receipt 1 2 0 4 2 0 0 7
City		State	Zip Code	Transaction ID: 14821736
Springfie	eld	IL	62781-0002	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		2.50
Name of E Memorial	Employer Health System	Occupation	n t & Chief Executive Officer	
Receipt Fo		Aggregate	Year-to-Date ▼ 1002.50	
Mr Edgar c	(Last, First, Middle Initial) Curtis, , R.N. dress 701 North First Street			Date of Receipt
City		State	Zip Code	1 2 0 4 2 0 0 7 Transaction ID: 14821770
<u>Springfie</u>	eld	IL	62781-0001	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		2.50
Name of E Memorial	Employer Health System	Occupation Chief Exe	n ecutive Officer	
Receipt Fo			Year-to-Date ▼ 752.50	
SUBTOTAL	of Receipts This Page (optional)			1005.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 305 (check only one) X
ny information copied from such Reports and S	Statements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , ,	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Alan Olive		Date of Receipt
Mailing Address 10101 Double R Blvd.		12 14 2007
City	State Zip Code	Transaction ID: 14823738
Reno	NV 89521-5931	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Renown Regional Medical Center	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00]
Full Name (Last, First, Middle Initial) Ms. Eva C. LaBarge		Date of Receipt
Mailing Address 6434 Sun Flag Ct.		M M / D D / Y Y Y Y Y Y Y 12 14 2007
City	State Zip Code	Transaction ID: 14823739
Sparks	NV 89436-5400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nevada Hospital Associati- on	Occupation Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Stephen M Erixon	1	Date of Receipt
Mailing Address 220 Windy Ridge		12 10 2007
City	State Zip Code	Transaction ID: 14825717
Hollister	MO 65672-5725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Skaggs Community Health Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	504.00	
		1042.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Skip Kriz Mailing Address 14432 SE Eastgate W City Bellevue FEC ID number of contributing federal political committee. Name of Employer PeaceHealth	Vay, Ste 300 State Zip Code WA 98007-6493 C	Date of Receipt 1 2 0 5 2 0 0 7 Transaction ID: 14826090 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify)	Senior Vice President Business Devel Aggregate Year-to-Date ▼ 250.00	elop
Full Name (Last, First, Middle Initial) Mr. Peter Adler Mailing Address 14432 SE Eastgate W	/ay, Ste. 300	Date of Receipt 1 2 0 5 2 0 0 7
City	State Zip Code	Transaction ID: 14826091
Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period 250.00
Name of Employer PeaceHealth Receipt For: Primary General Other (specify) ▼	Occupation Sr. VP, Strategy & Innovation Aggregate Year-to-Date 250.00]
Full Name (Last, First, Middle Initial) Mr. Stuart Hennessey	1	Date of Receipt
Mailing Address 14432 SE Eastgate W	/ay, Ste 300	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Bellingham</u>	State Zip Code WA 98007-6412	Transaction ID: 14826092 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer PeaceHealth	Occupation Senior Vice President Legal Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Jon D Smiley Mailing Address P O Box 719 City Sunnyside FEC ID number of contributing	Statements may e name and addr	not be sold or used by any personess of any political committee to Zip Code 98944-0719	Date of Receipt 1 2 0 5 2 0 0 7 Transaction ID: 14826093
Full Name (Last, First, Middle Initial) Mr. Jon D Smiley Mailing Address P O Box 719 City Sunnyside	WA	·	1 2 0 5 2 0 0 7 Transaction ID: 14826093
Mr. Jon D Smiley Mailing Address P O Box 719 City Sunnyside	WA	·	1 2 0 5 2 0 0 7 Transaction ID: 14826093
Sunnyside	WA	·	Transaction ID: 14826093
•		98944-0719	
federal political committee.			Amount of Each Receipt this Period 300.00
Name of Employer Sunnyside Community Hospi- tal	+ -	cutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. John R White Mailing Address 801 East Wheeler Roa			Date of Receipt
walling Address 801 East Wheeler Roa	a O		12 05 2007
City	State	Zip Code	Transaction ID: 14826144
Moses Lake FEC ID number of contributing federal political committee.	C	98837-1820	Amount of Each Receipt this Period 450.00
Name of Employer Samaritan Healthcare	Occupation President	and Chief Executive Officer	<u> </u>
Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Dr. Rodney F Hochman, , M.D. Mailing Address 747 Broadway Avenue			Date of Receipt
<u> </u>			12 05 2007
City <u>Seattle</u>	State WA	Zip Code 98122-4379	Transaction ID: 14826145 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30122-4373	500.00
Name of Employer Swedish Health Services	Occupation President	and Chief Executive Officer	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 305 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Calvin K Knight Mailing Address 747 Broadway Ave	nue	Date of Receipt
City Seattle FEC ID number of contributing	State Zip Code WA 98122-4307	Transaction ID: 14826146 Amount of Each Receipt this Period
Name of Employer Swedish Health Services Receipt For:	Occupation Chief Operating Officer Aggregate Year-to-Date ▼	500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Alan R Yordy	500.00	Date of Receipt
Mailing Address 14432 SE Eastgate City Bellevue	State Zip Code WA 98007-6493	Transaction ID: 14826147 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer PeaceHealth	Occupation	500.00
Receipt For: Primary General Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Maureen Tarrant Mailing Address 10101 Ridge Gate	Parkway	Date of Receipt
City	State Zip Code	1 2 1 2 2 0 0 7 Transaction ID: 14827727
Lone Tree FEC ID number of contributing federal political committee.	CO 80124-5522	Amount of Each Receipt this Period 500.00
Name of Employer Sky Ridge Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option:	al) >	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary L Brewer Mailing Address P O Box 1970 City Glenwood Springs FEC ID number of contributing federal political committee. Name of Employer Valley View Hospital	State Zip Code CO 81602-1970 C Occupation Chief Executive Officer	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Greg Burfitt Mailing Address 188 Inverness Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Englewood FEC ID number of contributing federal political committee.	State Zip Code CO 80112-5205 C Occupation	Transaction ID: 14827795 Amount of Each Receipt this Period 500.00
Name of Employer Centura Health Receipt For: Primary General Other (specify) ▼	Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jefrey A. Dorsey Mailing Address 4643 S. Ulster Stre Suite 1200		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Denver FEC ID number of contributing federal political committee.	State Zip Code CO 80237-2853	Transaction ID: 14827800 Amount of Each Receipt this Period 500.00
Name of Employer HealthONE	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1250.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 305 (check only one) X
Any information copied from or for commercial purposes, NAME OF COMMITTEE American Hospital A	other than using the name an (In Full)	s may not be sold or used by any person d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, N Mr. Dawn Ahner		e Zip Code	Date of Receipt 1 2 1 0 2 0 0 7 Transaction ID: 14827812
Reno FEC ID number of contri federal political committe			Amount of Each Receipt this Period 500.00
Name of Employer Renown Regional Medic Center Receipt For: Primary Other (specify) ▼	Cille	pation f Financial Officer egate Year-to-Date ▼ 500.00	
Full Name (Last, First, M Mr. Thomas F Hanrahan, Mailing Address Box 9	FACHE		Date of Receipt
City	Stat	e Zip Code	Transaction ID: 14827821
Ogden FEC ID number of contri federal political committe		84409-0370	Amount of Each Receipt this Period 250.00
Name of Employer McKay-Dee Hospital Ce	ntor	pation f Executive Officer	
Receipt For: Primary Other (specify)	1	egate Year-to-Date ▼ 250.00	
Full Name (Last, First, M Mr. H. Gary Pehrson	liddle Initial)		Date of Receipt
-	East 700 North		1 2 1 0 2 0 0 7
City	Stat	'	Transaction ID: 14828186
Kaysville FEC ID number of contri federal political committe		84037-1564	Amount of Each Receipt this Period 250.00
Name of Employer Intermountain Healthcare Inc.	۱ '	pation President	
Receipt For:	Aggre Aggre	egate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts T	his Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Larry D. Hancock Mailing Address 10183 South Loridan L	ane	Date of Receipt
City	State Zip Code UT 84092-4494	1 2 1 0 2 0 0 7 Transaction ID: 14828187
Sandy FEC ID number of contributing federal political committee.	UT 84092-4494	Amount of Each Receipt this Period 250.00
Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Merrill Gappmayer Mailing Address 1156 S. State		Date of Receipt
Suite 202 City	State Zip Code	1 2 1 0 2 0 0 7 Transaction ID: 14828188
Orem FEC ID number of contributing federal political committee.	UT 84097-8233	Amount of Each Receipt this Period 250.00
Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General	Occupation Trustee Aggregate Year-to-Date ▼ 250.00	-
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David C. Gessel, J.D.		Date of Receipt
Mailing Address 2180 South1300 East Suite 440		1 2 1 0 2 0 0 7
City Salt Lake City	State Zip Code UT 84106-2813	Transaction ID: 14828190 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer UHA, Utah Hospitals & Hea- Ith Systems A Receipt For:	Occupation Vice President, Government Relations Aggregate Year-to-Date	<u></u>
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u> </u>	75

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jeannie Matthews Ms. Jeannie Matthews		Date of Receipt
Mailing Address 1450 Battersby Aven	ue State Zip Code	1 2 1 8 2 0 0 7 Transaction ID: 14829458
<u>Enumclaw</u>	WA 98022-3634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Enumclaw Regional Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Gail F Donovan		Date of Receipt
Mailing Address 555 West 57th Stree	t 	12 18 2007
City	State Zip Code	Transaction ID: 14829460
New York	NY 10019-2925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Continuum Health Partners	Occupation Executive Vice President and Chief Op	oe
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Eileen F Skinner, , FACHE		Date of Receipt
Mailing Address 144 State Street		12 12 2007
City	State Zip Code	Transaction ID: 14829464
Portland FEC ID number of contributing federal political committee.	ME 04101-3776	Amount of Each Receipt this Period 125.00
Name of Employer Mercy Hospital of Portland	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)	>	1375.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
An or	y information copied from such Reports and S or commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Wayne Dodwell		Date of Receipt
	Mailing Address Rural Route 1, Box 11		12 12 2007
	City Machias	State Zip Code ME 04654-9758	Transaction ID: 14829512
	FEC ID number of contributing federal political committee.	C 04634-9736	Amount of Each Receipt this Period 250.00
	Name of Employer Down East Community Hospi- tal	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Michael J. Rock		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 14 2007
	City	State Zip Code	Transaction ID: 14835224
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 500.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms Virginia Kilmer		Date of Receipt
	Mailing Address 759 South Main Street	1	12 06 2007
	City	State Zip Code	Transaction ID: 14835227
	Woodstock FEC ID number of contributing federal political committee.	VA 22664-1127	Amount of Each Receipt this Period 250.00
	Name of Employer Valley Health System	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		ı	1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Rosemary C Check		Date of Receipt
Mailing Address 4770 Kempsville Green	•	12 06 2007
City	State Zip Code	Transaction ID: 14835229
Virginia Beach	VA 23462-6412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Obici Hospital	Occupation Vice President and Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Mark Werner, M.D. Mailing Address 809 Pendleton Drive		Date of Receipt
Walling Address 809 Feridie(Off Drive		12 06 2007
City	State Zip Code	Transaction ID: 14835329
Salem	VA 24153-2648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carilion Health System	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael J Halseth		Date of Receipt
Mailing Address P O Box 3340		1 2 0 6 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14835401
Winchester	VA 22604-1334	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Valley Health System	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A C	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) F Dixon Whitworth Mailing Address 14 S Washington Street		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14835402
	Winchester FEC ID number of contributing federal political committee.	VA 22601-4130	Amount of Each Receipt this Period 250.00
	Name of Employer Valley Health System Receipt For: Primary General Other (specify)	Occupation Board Chairman Aggregate Year-to-Date 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Rayburn Thompson Mailing Address Post Office Box 13367		Date of Receipt 1 2 0 6 2 0 0 7
	City	State Zip Code	Transaction ID: 14835404
	Roanoke	VA 24033-3367	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Carilion Medical Center	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Ms. Sharon M. Bass, Jr.		Date of Receipt
	Mailing Address 2619 Blue Hernon Circ	le	12 06 YYYYY 106 2007
	City	State Zip Code	Transaction ID: 14835475
	Roanoke FEC ID number of contributing federal political committee.	VA 24018-5133	Amount of Each Receipt this Period 250.00
	Name of Employer Carilion Health System	Occupation Vice President Imaging & Pharmacy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	········	750.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 305 (check only one) X 11a
or for con	mation copied from such Reports and St nmercial purposes, other than using the OF COMMITTEE (In Full) rican Hospital Association PAC	tatements may name and ado	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Ja Mailin	ame (Last, First, Middle Initial) mes Shriver g Address 4 Sandy Hill Road			Date of Receipt 1 2 2 0 7 2 0 0 7
City	field	State MA	Zip Code	Transaction ID: 14835566
	D number of contributing I political committee.	C	02048-3245	Amount of Each Receipt this Period 250.00
<u>rst Co</u> Receil	of Employer England Region for Fi- nsultin ot For: Primary General Other (specify)		ce President Year-to-Date 250.00	
Ms. Ly	ame (Last, First, Middle Initial) nn B. Nicholas, FACHE g Address Five New England Exec	cutive Park		Date of Receipt 1 2 2 0 2 0 7
City		State	Zip Code	Transaction ID: 14835567
<u>Burlii</u>	ngton	MA	01803-5010	Amount of Each Receipt this Period
	D number of contributing I political committee.	C		1000.00
Massa <u>sociat</u> Recei			and Chief Executive Office Year-to-Date ▼ 2000.00	r
	ame (Last, First, Middle Initial)			Data of Bassint
· ———	ovid Tew g Address 7500 Mercy Road			Date of Receipt 1 2 2 0 2 0 7
City		State	Zip Code	Transaction ID: 14835577
<u>Oma</u>		NE	68124-2319	Amount of Each Receipt this Period
	D number of contributing I political committee.	С		250.00
<u>cy Me</u>	of Employer nt Health Bergan Mer- dical Ce	_ '	ident Chief Operating Office	ce
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTO	FAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert J. Loprete Mailing Address 435 Rand Hill Road City	State Zip Code	Date of Receipt M M 2 2 2 2 0 0 7
Alton Bay FEC ID number of contributing federal political committee.	NH 03810-4443	Amount of Each Receipt this Period 250.00
Name of Employer Massachusetts Organization of Nurse Ex Receipt For: Primary General Other (specify)	Occupation Executive Director Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David W Benfer, , FACHE Mailing Address 1450 Chapel Street		Date of Receipt
City	State Zip Code	Transaction ID: 14835621
New Haven	CT 06511-4405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hospital of Saint Raphael	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Steve Altmiller		Date of Receipt
Mailing Address 801 West Maple Str	eet	1 2 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14836237
<u>Farmington</u>	NM 87401-5698	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer San Juan Regional Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line numb	ner only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James H Hinton Mailing Address P O Box 26666 City Albuquerque FEC ID number of contributing federal political committee.	State Zip Code NM 87125-6666	Date of Receipt M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14836241 Amount of Each Receipt this Period 500.00
Name of Employer Presbyterian Healthcare Services Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. David R. Scrase Mailing Address 16 Calle Cholla Placitas City Placitas	State Zip Code NM 87043-9310	Date of Receipt 1 2 1 0 2 0 0 7 Transaction ID: 14836242 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Presbyterian Healthcare Services Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Mr. Robert A Garcia Mailing Address P O Box 26666 City Albuquerque	State Zip Code NM 87125-6666	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Presbyterian Kaseman Hospital Receipt For: Primary General Other (specify)	Occupation Administrative Director Aggregate Year-to-Date 250.00	250.00
SUBTOTAL of Receipts This Page (option	nal)	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial)	,	
Ms Virginia Kilmer Mailing Address 759 South Main Stre	eet	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Woodstock	State Zip Code VA 22664-1127	Transaction ID: 14852173 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Valley Health System	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Rosemary C Check Mailing Address 4770 Kempsville Gr	eens Parkway	Date of Receipt
City	State Zip Code	1 2 1 1 2 0 0 7 Transaction ID: 14852175
Virginia Beach	VA 23462-6412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Obici Hospital	Occupation Vice President and Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. George Heuser, MD		Date of Receipt
Mailing Address 1744 Jack Frost Ro	ad	12 11 2007
City Virginia Beach	State Zip Code VA 23455-3221	Transaction ID: 14852179 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 20433 3221	250.00
Name of Employer Sentara Healthcare	Occupation Administrator	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line numl	per only)	

CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 82/305 (check only one)	
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Mr. Stephen Porter			Date of Receipt
Mailing Address 1314 Brunswick Ave	enue		12 11 2007
City Norfolk	State VA	Zip Code 23508-1345	Transaction ID: 14852184 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20000 1040	250.00
Name of Employer Sentara Bayside Hospital	Occupatio Vice Pres	n sident Admin	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mary Davis-Mitchell			Date of Receipt
Mailing Address 11210 Lapham Drive	е		1 2 1 1 2 0 0 7
City Oakton	State VA	Zip Code	Transaction ID: 14852186
FEC ID number of contributing federal political committee.	C	22124-1317	Amount of Each Receipt this Period 250.00
Name of Employer Prince William Hospital	Occupatio	n rsing Officer	
Receipt For: Primary General Other (specify) ▼	-, '	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Richard Magenheimer			Date of Receipt
Mailing Address 10704 Ellies Court			1 2 1 1 2 0 0 7
City Fairfax Station	State VA	Zip Code 22039-1876	Transaction ID: 14852188
FEC ID number of contributing federal political committee.	C	22039-1070	Amount of Each Receipt this Period 250.00
Name of Employer Inova Health System	Occupatio Chief Fin	n ancial Officer	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	I		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83/305 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Dr. Thomas Thames, M.D.			Date of Receipt
Mailing Address 1309 Smith Cove C	ircle		12 11 2007
City Virginia Beach	State VA	Zip Code 23455-6834	Transaction ID: 14852318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20433 0004	250.00
Name of Employer Maryview Medical Center	Occupation Interim C	n Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Howard P Kern			Date of Receipt
Mailing Address 6015 Poplar Hall Dr	rive		12 11 2007
City Norfolk	State VA	Zip Code 23502-3819	Transaction ID: 14852322
FEC ID number of contributing federal political committee.	C	25502-5619	Amount of Each Receipt this Period 250.00
Name of Employer Sentara Healthcare	Occupation	n t and Chief Operating Office	r
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Norman F Gruber			Date of Receipt
Mailing Address 4768 Circuit Rider L	_ane		M M / D D / Y Y Y Y Y Y Y 12 14 2007
City Salem	State OR	Zip Code 97302-9798	Transaction ID: 14852337
FEC ID number of contributing federal political committee.	C	97302-9790	Amount of Each Receipt this Period 100.00
Name of Employer Salem Hospital	Occupation President	n t and Chief Executive Office	-
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	l)		600.00

	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Paul Janke, , FACHE Mailing Address 1-12 NW Washington City Grants Pass FEC ID number of contributing federal political committee. Name of Employer Three Rivers Community Hospital and He Receipt For: Primary General	State Zip Code OR 97526 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14852342 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Ronald Goodspeed Mailing Address 5 Alumni Drive City Exeter FEC ID number of contributing federal political committee. Name of Employer Exeter Hospital Receipt For:	State Zip Code NH 03833-2128 C Occupation Director, Community Relations	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Pamela S Vukovich Mailing Address 1919 NW Lovejoy Stree City Portland FEC ID number of contributing federal political committee.	Aggregate Year-to-Date 250.00 State Zip Code OR 97209-1503	Date of Receipt 1 2
Name of Employer Legacy Health System Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President and Chief Final Aggregate Year-to-Date 500.00	inc
SUBTOTAL of Receipts This Page (optional)		1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 85 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be s name and address of a	old or used by any perso ny political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. April Whitworth			Date of Receipt
	Mailing Address 12855 SW Sixth Stree	-		12 14 2007
	City Beaverton		Code 05-2756	Transaction ID: 14852356 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00 2700	250.00
	Name of Employer Legacy Emanuel Hospital and Health Cen	Occupation Chief Administra	tive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Edward Schreck			Date of Receipt
	Mailing Address 555 NW Park Avenue	#601		12 14 2007
	City Portland		Code	Transaction ID: 14852411
	FORGATION FEC ID number of contributing federal political committee.	C 972	09-3420	Amount of Each Receipt this Period 500.00
	Name of Employer Legacy Health System	Occupation Senior Vice Pres	ident Administrative	S
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Richard Gibson	Date of Receipt		
	Mailing Address 1000 NE Greenleaf Road			1 2 1 4 2 0 0 7
	City Portland	State Zip 0 OR 972	Code	Transaction ID: 14852413 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Legacy Health System	Occupation Senior VP & Chie	ef Information Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
f	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 305 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steve Kinzer Mailing Address 1347 SE 26th Drive City Gresham FEC ID number of contributing federal political committee. Name of Employer Adventist Medical Center Receipt For:	State Zip Code OR 97080-5228 C Occupation CEO Medical Group Aggregate Year-to-Date ▼	Date of Receipt 1 2 1 4 2 0 0 7 Transaction ID: 14852421 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Carol Kunau	250.00	Date of Receipt
Mailing Address 10123 Southeast Mark	State Zip Code	1 2 1 4 2 0 0 7 Transaction ID: 14852422
Portland FEC ID number of contributing federal political committee.	OR 97216-2532	Amount of Each Receipt this Period 250.00
Name of Employer Adventist Medical Center Receipt For: Primary General Other (specify) ▼	Occupation VP, Patient Care Services Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Dennis E Burke	<u> </u>	Date of Receipt
Mailing Address 370 W Gettman Road		12 14 2007
City <u>Hermiston</u>	State Zip Code OR 97838-8456	Transaction ID: 14852425 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Good Shepherd Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	1	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to s	13 14 15 16 16 16 17 16 17 16 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Russ Reinhard		Date of Receipt
Mailing Address 34514 S Elliott Road		12 14 2007
City	State Zip Code	Transaction ID: 14852426
Woodburn	OR 97071-8702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Willamette Falls Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Peter F Rapp		Date of Receipt
Mailing Address 2828 NW Cumberlan	12 14 2007	
City	State Zip Code	Transaction ID: 14852427
Portland	OR 97201-3098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer OHSU Hospital	Occupation Vice President and Executive Director	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Kevin E Lofton		Date of Receipt
Mailing Address 1999 Broadway, Suit	e 2600	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14852449
Denver	CO 80202-3025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Catholic Health Initiativ- es	Occupation President and Chief Executive Officer	1
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	1000.00	
		1750.00

ercial purposes, other than using the F COMMITTEE (In Full) an Hospital Association PAC et (Last, First, Middle Initial) in Pitman Giles ddress 100 McGregor Street ster umber of contributing olitical committee. Employer Medical Center for: Inary General er (specify) et (Last, First, Middle Initial) P Schindel ddress 150 York Street	State NH C	Zip Code 03102-3770 d Chief Executive Office	Date of Receipt Date of Receipt Transaction ID: 14852450 Amount of Each Receipt this Period Date of Receipt Date of Receipt 250.00 Transaction ID: 14852451 Amount of Each Receipt this Period
e (Last, First, Middle Initial) n Pitman Giles ddress 100 McGregor Street ster umber of contributing onitical committee. Employer Medical Center for: nary General er (specify) e (Last, First, Middle Initial) P Schindel ddress 150 York Street	State NH C Occupation President an Aggregate Yea State MA	d Chief Executive Office ar-to-Date ▼ 250.00	Transaction ID: 14852450 Amount of Each Receipt this Period 250.00 Table of Receipt 250.00 Transaction ID: 14852451
n Pitman Giles ddress 100 McGregor Street ster umber of contributing blitical committee. Employer Medical Center or: mary General er (specify) e (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	State NH C Occupation President an Aggregate Yea State MA	d Chief Executive Office ar-to-Date ▼ 250.00	Transaction ID: 14852450 Amount of Each Receipt this Period 250.00 Table of Receipt 250.00 Transaction ID: 14852451
ster umber of contributing olitical committee. Employer Medical Center for: nary General er (specify) e (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	State NH C Occupation President an Aggregate Yea State MA	d Chief Executive Office ar-to-Date ▼ 250.00	Transaction ID: 14852450 Amount of Each Receipt this Period 250.00 T Date of Receipt 1 2 2 8 2 0 0 7 7 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
umber of contributing solitical committee. Employer Medical Center for: nary General er (specify) e (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	Occupation President an Aggregate Yea	d Chief Executive Office ar-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00 T Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14852451
umber of contributing solitical committee. Employer Medical Center for: nary General er (specify) e (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	Occupation President an Aggregate Yea	d Chief Executive Office ar-to-Date ▼ 250.00	Date of Receipt Date of Receipt
or: nary General er (specify) ▼ e (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	President an Aggregate Year State MA	zir-to-Date ▼ 250.00 Zip Code	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14852451
er (specify) er (specify) er (Last, First, Middle Initial) P Schindel ddress 150 York Street on umber of contributing	State MA	250.00 Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14852451
P Schindel ddress 150 York Street on umber of contributing	MA	•	1 2 2 8 2 0 0 7 Transaction ID: 14852451
on umber of contributing	MA	•	1 2 2 8 2 0 0 7 Transaction ID: 14852451
umber of contributing	MA	•	
umber of contributing		02072-1829	Amount of Each Receipt this Period
	C ' '		
olitical committee.			250.00
Employer land Sinai Hospital abil	Occupation President an	d Chief Executive Office	r
or: nary General er (specify) ♥	Aggregate Yea	ar-to-Date ▼ 250.00	
e (Last, First, Middle Initial) McAuliffe			Date of Receipt
ddress 70 Glover Avenue			12 28 YYYY 12007
	State	Zip Code	Transaction ID: 14852452
	MA	02171-2324	Amount of Each Receipt this Period
umber of contributing olitical committee.	С		250.00
Employer usetts Hospital As-			
or:	Aggregate Yea	ar-to-Date 🔻	_
nary ☐ General er (specify) ♥		250.00	
of Receipts This Page (optional)	1		750.00
	McAuliffe ddress 70 Glover Avenue umber of contributing ditical committee. Employer usetts Hospital As- or: nary General er (specify)	McAuliffe ddress 70 Glover Avenue State MA umber of contributing litical committee. Employer usetts Hospital As- or: nary General er (specify) Aggregate Yea	McAuliffe ddress 70 Glover Avenue State Zip Code MA 02171-2324 umber of contributing ditical committee. Employer usetts Hospital As- or: nary General General Aggregate Year-to-Date ▼

SCHEDULE A (FEC FOI ITEMIZED RECEIPTS	m 3X) Use separate schedu for each category of the Detailed Summary Page 1	he (crieck only one)
Any information copied from such Re or for commercial purposes, other the NAME OF COMMITTEE (In Full) American Hospital Association	n using the name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
Full Name (Last, First, Middle Init Mr. Bill M. Welch Mailing Address 3352 Corey City Reno	<u> </u>	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14852454 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Nevada Hospital Association Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Aggregate Year-to-Date 500	500.00
Full Name (Last, First, Middle Init Mr Chris Bosse Mailing Address 77 Pringle W City Reno FEC ID number of contributing federal political committee. Name of Employer Renown Health Receipt For: Primary General Other (specify)	State Zip Code NV 89502-1474 C Occupation Director, Government Relation Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Init Mr. Laurence M Merlis Mailing Address 6701 North (City Baltimore FEC ID number of contributing federal political committee. Name of Employer Greater Baltimore Medical Center Receipt For: Primary General	State Zip Code MD 21204-6808 C Occupation President and Chief Executive Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 8 / 2 0 0 7 Transaction ID: 14852456 Amount of Each Receipt this Period 425.00
Other (specify) ▼ SUBTOTAL of Receipts This Page	optional)	1425.00

CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 305 (check only one) X
for commercial purposes, other than using the	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Thomas A Kleinhanzl		Date of Receipt
Mailing Address 400 West Seventh St		12 28 2007
City Frederick	State Zip Code MD 21701-4506	Transaction ID: 14852458 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Frederick Memorial Hospit- al	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Wayne A. Smith	Date of Receipt	
Mailing Address 1280 South Governor	's Avenue	12 28 2007
City	State Zip Code	Transaction ID: 14852769
Dover	DE 19904-4802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer Delaware Healthcare Association	Occupation President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	580.00	
Full Name (Last, First, Middle Initial) Dr. Robert J Laskowski, , M.D.		Date of Receipt
Mailing Address P O Box 1668		12 28 2007
City	State Zip Code	Transaction ID: 14852770
Wilmington	DE 19899-1668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Christiana Care Health Sy- stem	Occupation President and Chief Executive Office	r
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) ▼	1090.00	
SUBTOTAL of Receipts This Page (optional)	1	370.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 305 (check only one) X
A or	ny information copied from such Reports and S for commercial purposes, other than using the	itatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Edward A Eckenhoff		Date of Receipt
	Mailing Address 102 Irving Street NW		12 17 2007
	City	State Zip Code	Transaction ID: 14852772
	Washington	DC 20010-2949	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer National Rehabilitation Hospital	Occupation President and Chief Executive Officer	-
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) Mr. John G O'Brien		Date of Receipt
	Mailing Address 1 Biotech Park		12 19 2007
	City	State Zip Code	Transaction ID: 14852773
	Worcester	MA 01605-2982	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer UMass Memorial Health Car- e, Inc.	Occupation President and Chief Executive Officer	r
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Ms. Marie Beatrice Grause, RN, JD	<u> </u>	Date of Receipt
	Mailing Address 1580 North Street		12 19 2007
	City	State Zip Code	Transaction ID: 14852774
	Montpelier	VT 05602-2997	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Vermont Association of Ho- spitals & Hea	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	1000.00]
Г			2250.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 305 (check only one) X
or for commo	tion copied from such Reports and Stercial purposes, other than using the F COMMITTEE (In Full) an Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Richa	e (Last, First, Middle Initial) ard Slusky ddress 289 County Road	State	Zip Code	Date of Receipt M
	or number of contributing olitical committee.	VT C	05089-9702	Amount of Each Receipt this Period 250.00
Health C Receipt F Prii	Employer threy Hospital and ente For: mary General ner (specify)	Occupation CEO Aggregate	Year-to-Date ▼ 500.00	
Ms. Trina	e (Last, First, Middle Initial) Schilling ddress P O Box 647			Date of Receipt
City <u>Wishek</u> FEC ID r	number of contributing	State ND	Zip Code 58495-0647	Transaction ID: 14852780 Amount of Each Receipt this Period
Name of Wishek (and Clini Receipt F	olitical committee. Employer Community Hospital cs		n Chief Executive Officer Year-to-Date ▼	250.00
	e (Last, First, Middle Initial) a S. Quick address 1530 Gabriel Street			Date of Receipt
City Hollywo	ood	State FL	Zip Code 33020-3228	Transaction ID: 14852783 Amount of Each Receipt this Period
	number of contributing olitical committee.	C		250.00
<u>sociation</u>		Occupation Presiden	t	
	-or: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL	L of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Paul R Bengtson Mailing Address P O Box 905 City Saint Johnsbury FEC ID number of contributing federal political committee. Name of Employer Northeastern Vermont Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code VT 05819-9962 C Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14852784 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Mr. Richard G Hilton Mailing Address Drawer 1506 City Starkville FEC ID number of contributing federal political committee. Name of Employer Oktibbeha County Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39760-1506 C Occupation Associate Administrator and Chief Fin Aggregate Year-to-Date 250.00	Date of Receipt M M M / 20 / 2007 Transaction ID: 14853088 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Mr. W. Kent Rogers Mailing Address 835 Medical Center December 1 City West Point FEC ID number of contributing federal political committee. Name of Employer North Mississippi Medical Center-West Receipt For: Primary General Other (specify)	State Zip Code MS 39773-9320 C Occupation CEO/Administrator Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 14853089 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		700.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
·	Full Name (Last, First, Middle Initial) Mr. Thomas Crawford Mailing Address 11 juniper hill road		Date of Receipt
			12 31 2007
	City Springfield	State Zip Code VT 05156-9154	Transaction ID: 14855947 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Springfield Hospital	Occupation Chief Executive Officer	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Kimberly Ann Davidson		Date of Receipt
	Mailing Address 5314 Qual Drive		12 31 2007
	City	State Zip Code	Transaction ID: 14861050
	Shawnee	KS 66203-1968	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer University of Kansas Hosp- ital	Occupation Registered Nurse: Bachelor of Science	9
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Mr. Edward J. Dunn		Date of Receipt
	Mailing Address 305 Hickory Lane		12 28 2007
	City	State Zip Code	Transaction ID: 14861146
	Haddonfield	NJ 08033-3813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Virtua Health	Occupation Vice President Human Resources	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	500.00	
		>	1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 305 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John E. Graydon Mailing Address 93 Matlack Drive City Voorhees FEC ID number of contributing federal political committee. Name of Employer Virtua Health Receipt For: Primary General Other (specify)	State Zip Code NJ 08043-4723 C Occupation Vice President Aggregate Year-to-Date 500.00	Date of Receipt M M J 28 2007 Transaction ID: 14861155 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Fred Hipp, Jr. Mailing Address 1011 Deacon Road City Hainesport FEC ID number of contributing federal political committee. Name of Employer Virtua Health Receipt For: Primary General	d State Zip Code NJ 08036-3610 C Occupation Vice President Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 8 / 2 0 0 7 Transaction ID: 14861156 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Cres City Manasquan FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ SUBTOTAL of Receipts This Page (option	230.00	755.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Ro City Langhorne FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For:		Date of Receipt M M / D D / Y Y Y Y Y 1 2 8 2 8 2 0 0 7 Transaction ID: 14861165 Amount of Each Receipt this Period 5.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. John J. Dawidowski	250.00	Date of Receipt
Mailing Address 17 Brookshire Drive City Robbinsville FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 08691-2554 C Occupation Vice President & General Manager Aggregate Year-to-Date 250.00	Transaction ID: 14861166 Amount of Each Receipt this Period 5.00
Full Name (Last, First, Middle Initial) Mr. Guy P. Evans Mailing Address 41 Manitto Place City Oceanport FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For:	State Zip Code NJ 07757-1510 C Occupation Vice President Aggregate Year-to-Date ▼	Date of Receipt 1 2 28 2007 Transaction ID: 14861170 Amount of Each Receipt this Period 5.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional	250.00	15.00

	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Gary L. Long		Date of Receipt
Mailing Address 2 Meadowview Drive	7.0.1	12 28 2007
City <u>Shamong</u>	State Zip Code NJ 08088-8596	Transaction ID: 14861178 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Virtua Health	Occupation COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Linda Wilson		Date of Receipt
Mailing Address 331 Jackson Road		12 28 2007
City	State Zip Code	Transaction ID: 14861187
Atco	NJ 08004-1646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Virtua Health	Occupation Vice President Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt
Mailing Address 27 Harvest Lane		12 28 2007
City	State Zip Code	Transaction ID: 14861188
Livingston FEC ID number of contributing	NJ 07039-2750	Amount of Each Receipt this Period
federal political committee. Name of Employer New Jersey Hospital Assoc-	Occupation	
iation	Vice President Continuing Care Service	d
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .		1015.00
TOTAL This Period (last page this line numbe	<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 305 (check only one) X
A	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain I	Road		Date of Receipt 1 2 2 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 14861189
	New Hope FEC ID number of contributing federal political committee.	C	18938-5760	Amount of Each Receipt this Period 25.42
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n Health Economics e Year-to-Date ▼ 375.01]
	Full Name (Last, First, Middle Initial) Mr. Robert Brehm Mailing Address 1199 Pleasant Valley V	Vay		Date of Receipt
	City	State	Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14861190
	West Orange	NJ	07052-1424	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.50
	Name of Employer Kessler Institute for Reh- abilitation	Occupation Presiden		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 362.50]
_	Full Name (Last, First, Middle Initial) Mr. David P. Lavins			Date of Receipt
	Mailing Address 10 Fox Chase Road			12 28 2007
	City	State	Zip Code	Transaction ID: 14861194
	<u>Malvern</u>	PA	19355-3441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer New Jersey Hospital Assoc- iation		ancial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
\[\sigma_{\text{s}}	SUBTOTAL of Receipts This Page (optional)			412.92

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Robert W Kay Mailing Address 701 North First Stree City Springfield FEC ID number of contributing federal political committee. Name of Employer Memorial Medical Center Receipt For: Primary General Other (specify)	State Zip Code IL 62781-0001 C Occupation Senior Vice President and Chief Finan Aggregate Year-to-Date 252.50	Date of Receipt 1 2
Full Name (Last, First, Middle Initial) Mr. Vincent S Conti Mailing Address 22 Bramhall Street City Portland FEC ID number of contributing federal political committee. Name of Employer Maine Medical Center Receipt For: Primary General	State Zip Code ME 04102-3134 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Jane Robertson Mailing Address 2161 Wedgewood C City Auburn FEC ID number of contributing federal political committee. Name of Employer East Alabama Medical Center Receipt For: Primary Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1502.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610 City Sheffield FEC ID number of contributing federal political committee. Name of Employer Helen Keller Hospital	State Zip Code AL 35660-0610 C Occupation President	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael D Marshall Mailing Address P O Box 890	•	Date of Receipt
City Demopolis FEC ID number of contributing federal political committee.	State Zip Code AL 36732-0890	Transaction ID: 14862630 Amount of Each Receipt this Period 700.00
Name of Employer Bryan W. Whitfield Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Administrator and Chief Executive Offi Aggregate Year-to-Date 700.00	
Full Name (Last, First, Middle Initial) Mr. Clark P. Christianson Mailing Address 6762 Stoneridge Co	ourt	Date of Receipt 1 2 2 1 2 0 0 7
City Mobile	State Zip Code AL 36695-3061	Transaction ID: 14862631 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	570.00
Name of Employer Providence Hospital	Occupation President	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 570.00	
SUBTOTAL of Receipts This Page (optional	1)	2270.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Barry S Cochran, , FACHE		Date of Receipt
Mailing Address P O Drawer 710	Ctata Zin Coda	12 21 2007
City Fayette	State Zip Code AL 35555-0710	Transaction ID: 14862632 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	509.00
Name of Employer Fayette Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 509.00	
Full Name (Last, First, Middle Initial) Mr. Carl W Bailey		Date of Receipt
Mailing Address P O Box 818		12 21 2007
City	State Zip Code	Transaction ID: 14862633
Florence	AL 35631-0818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Eliza Coffee Memorial Hos- pital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Ronald S Owen		Date of Receipt
Mailing Address P O Box 6987		12 21 2007
City	State Zip Code	Transaction ID: 14862634
Dothan	AL 36302-6987	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Southeast Alabama Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1509.00

SCHEDULE A (ITEMIZED REC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purpos NAME OF COMMIT	ses, other than using the name	ents may not be sold or used by any per- and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, Firs Mr. Sammy Watson Mailing Address 8(t, Middle Initial) 9 University Boulevard E.		Date of Receipt
City		State Zip Code	Transaction ID: 14862635
Tuscaloosa FEC ID number of co federal political comn	entributing	AL 35401-2071	Amount of Each Receipt this Period 463.00
Name of Employer DCH Health System Receipt For: Primary Other (specify)	Di Aç General	ecupation rector, Community Relations ggregate Year-to-Date ▼ 463.00	
Full Name (Last, Firs Ms. Becky DeVillier Mailing Address 17	t, Middle Initial) 700 Center Street		Date of Receipt 1 2 2 1 2 0 0 7
City	5	State Zip Code	Transaction ID: 14862636
Mobile FEC ID number of confederal political comm	entributing	AL 36604-3301	Amount of Each Receipt this Period 420.00
Name of Employer University of South A ma Children's Receipt For: Primary Other (specify)	General Aç	dministrator ggregate Year-to-Date ▼ 420.00	
Full Name (Last, Firs Mr. Ralph H. Clark, Jr. Mailing Address 60	FACHE		Date of Receipt 1 2 2 1 2 0 0 7
City	5	State Zip Code	Transaction ID: 14862637
Sheffield		AL 35660-7263	Amount of Each Receipt this Period
FEC ID number of co federal political comn			300.00
Name of Employer Medical Center Barb		ccupation EO	
Receipt For: Primary Other (specify)	Aç General	ggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipt	s This Page (optional)		1183.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 103 / 305 (check only one) X
	Detailed Summary Page	13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Allen P Fletcher		Date of Receipt
Mailing Address P O Box 2208		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14862638
Anniston	AL 36202-2208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Northeast Alabama Regional Medical Cen	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Brannon		Date of Receipt
Mailing Address 400 North Edwards	Street	12 21 YYYYY 12 21 2007
City	State Zip Code	Transaction ID: 14862639
<u>Enterprise</u>	AL 36330-2510	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Medical Center Enterprise	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Donald Henderson		Date of Receipt
Mailing Address 8213 Marsh Pointe I	Drive	1 2 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14862640
Montgomery	AL 36117-7432	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Hospital and Clin- ic	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
)	850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Victoria W. Jones Mailing Address 695 Dopson Point Ro	ad	Date of Receipt 1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14862641
Tallassee	AL 36078-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Hospital and Clin- ic	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Susan M. Kazmierkiewicz Mailing Address 4300 Delmar Drive		Date of Receipt
		12 21 2007
City <u>Montgomery</u>	State Zip Code AL 36109-2503	Transaction ID: 14862642
FEC ID number of contributing federal political committee.	C 30109-2303	Amount of Each Receipt this Period 250.00
Name of Employer Jackson Hospital and Clin- ic	Occupation Director, Radiology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Edward C Scholl		Date of Receipt
Mailing Address 1725 Pine Street		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14862643
Montgomery	AL 36106-1117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Hospital and Clin- ic	Occupation Assistant Administrator Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Philip L Cusa Mailing Address P O Drawer 929			Date of Receipt
City Fairhope	State AL	Zip Code 36533-0929	Transaction ID: 14862644 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	n	250.00
Thomas Hośpitál Receipt For: Primary General Other (specify) ▼	Administ Aggregate	rator • Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Floyd Mailing Address 315 West Hickory S	treet		Date of Receipt 1 2 2 1 2 0 0 7
City	State	Zip Code	Transaction ID: 14862645
Sylacauga	AL	35150-2996	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Coosa Valley Medical Cent- er	Occupation Board Me	ember	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Jason P. Alexander			Date of Receipt
Mailing Address 7220 Wynnridge Dri	ive		12 21 2007
City	State	Zip Code	Transaction ID: 14862646
Mobile FEC ID number of contributing federal political committee.	C	36695-5500	Amount of Each Receipt this Period 205.00
Name of Employer Providence Hospital	Occupation Executive	n e Vice President & COO	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 205.00	
SUBTOTAL of Receipts This Page (optional)		705.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 305 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William A Giudice Mailing Address 1300 Miccosukee Road City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial Heal-thCare Receipt For: Primary General	State Zip Code FL 32308-5093 C Occupation Chief Financial Officer and Vice Pres Aggregate Year-to-Date 375.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Ms. Kathleen Murray Mailing Address 13286 Stone Pond Driv City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Medical Center Receipt For: Primary General	State Zip Code FL 32224-1622 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. John Mahoney, MD Mailing Address 2920 Ivanahoe Road City Tallahassee FEC ID number of contributing federal political committee. Name of Employer	250.00 State Zip Code FL 32312-2824 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Chief Medical Officer Aggregate Year-to-Date ▼ 250.00	812.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steve Adriaanse Mailing Address 3042 Fermanagh City Tallahassee FEC ID number of contributing	Drive State Zip Code FL 32309-3333	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary Other (specify) ▼	Occupation HR Administrator Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms. Rochelle Ayala Mailing Address PO Box 267547		Date of Receipt 1 2 2 1 2 0 0 7
City Weston FEC ID number of contributing federal political committee.	State Zip Code FL 33326-7547	Transaction ID: 14862711 Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date ▼ 250.00	- - 1
Full Name (Last, First, Middle Initial) Ms. Veronica Bautista Mailing Address 11022 Chandler D	Orive	Date of Receipt 1 2 2 1 2 0 0 7
City Hollywood	State Zip Code FL 33026-4742	Transaction ID: 14862713 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	250.00
Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼	Director of Finance Aggregate Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (option	nal)	750.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. John A. Benz. Mailing Address 3501 Johnson Street Clay Hollywood FEC ID number of contributing federal political committee. Primary Other (specify) ▼ State Zip Code Primary Other (specify) ▼ State State Zip Code Primary State Zip C	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 3501 Johnson Street City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Full Name (Last, First, Middle Initial) Mailing Address 3501 Johnson Street City State Zip Code Hollwood FEC ID number of contributing federal political committee. City State Zip Code Hollwood FEC ID number of contributing federal political committee. City State Zip Code Hollwood FEC ID number of contributing federal political committee. City State Zip Code Hollwood FEC ID number of contributing federal political committee. City Address 3501 Johnson Street City State Zip Code FEC ID number of contributing federal political committee. City Administrator Process Engineering Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ma Sue E Bradford, R.N. Mailing Address 703 North Flamingo Road City State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. C State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. C State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. C State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. C State Zip Code Pembroke Pines FL 3500.00	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Occupation Sr. VP & Chief Strategic Officer	Mr John A Benz Mailing Address 3501 Johnson Street City		1 2 2 1 2 0 0 7 Transaction ID: 14862714
Receipt For:	FEC ID number of contributing federal political committee.	C	
Mailing Address 3501 Johnson Street City State Zip Code FL 33021-5421 FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Address 703 North Flamingo Road Full Name (Last, First, Middle Initial) Ms Sue E Bradford, R.N. Mailing Address 703 North Flamingo Road Fel D number of contributing federal political committee. City State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Capture of Employer Memorial Hospital Aggregate Year-to-Date ▼ City State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Capture of Employer Memorial Hospital West Chief Operating Officer Receipt For: Aggregate Year-to-Date ▼ Cocupation Chief Operating Officer Aggregate Year-to-Date ▼ Cocupation Chief Operating Officer Aggregate Year-to-Date ▼ State Zip Code Transaction ID: 14862766 Amount of Each Receipt this Period State	Receipt For: Primary General	Sr. VP & Chief Strategic Officer Aggregate Year-to-Date ▼ 500.00	
City State Zip Code FL 33021-5421 FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Aggregate Year-to-Date V 12 0 0 7 City State Zip Code FL 33028-1014 FEC ID number of contributing federal political committee. Parmary General Other (specify) ▼	Mr Forest Blanton		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify) ▼ City State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Chief Operating Officer Receipt For: Primary General Occupation Administrator Process Engineering Aggregate Year-to-Date ▼ Date of Receipt M M M M M M M M M M M M M M M M M M M	•	<u>.</u>	Transaction ID: 14862715
Receipt For: Primary General Sould S		C	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Sue E Bradford, R.N. Mailing Address 703 North Flamingo Road City Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	Name of Employer Memorial Regional Hospital	· '	
Ms Sue E Bradford, R.N. Mailing Address 703 North Flamingo Road City State Zip Code Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 14862766 Amount of Each Receipt this Period C Sound Transaction ID: 14862766 Amount of Each Receipt this Period 500.00	Primary General		
City Pembroke Pines FL 33028-1014 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Primary Other (specify) ▼ State Zip Code FL 33028-1014 Amount of Each Receipt this Period C Soupation Chief Operating Officer Aggregate Year-to-Date 500.00	Ms Sue E Bradford, R.N.		Date of Receipt
Pembroke Pines FL 33028-1014 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Chief Operating Officer Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			12 21 2007
FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	•	'	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		C	
Primary General Other (specify) ▼ 500.00	Name of Employer Memorial Hospital West	•	
1500.00	Primary General	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Walter Bussell		Date of Receipt
Mailing Address 703 North Flaming	o Road	12 21 7 2007
City Pembroke Pines	State Zip Code FL 33028-1014	Transaction ID: 14862770
FEC ID number of contributing federal political committee.	FL 33028-1014	Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hospital West	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Leah A. Carpenter, BS,RN,MPA Mailing Address 2571 SW 192nd A	venue	Date of Receipt
City	State Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14862771
Miramar	FL 33029-2463	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Healthcare System	Occupation Chief Nursing Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Clarice M. Conti		Date of Receipt
Mailing Address 407 SE 6th Street		12 21 2007
City	State Zip Code	Transaction ID: 14862775
Dania Beach FEC ID number of contributing federal political committee.	FL 33004-4714	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al) >	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sandra M. Dilts Mailing Address 13308 South West 42r City Davie FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify)	State Zip Code FL 33330 C Occupation Director, Business Development & Ph Aggregate Year-to-Date 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Mr. William A. Edelstein Mailing Address 1930 Lakepoint Dr. City Weston FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33326-2355 C Occupation Nursing Home Administrator Aggregate Year-to-Date 250.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Eric Freling Mailing Address 2500 Princeton Court City Weston FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital Miramar Receipt For: Primary General Other (specify)	State Zip Code FL 33327-1501 C Occupation Director, Medical Affairs Aggregate Year-to-Date 250.00	Date of Receipt M M D D 2 1 2 0 0 7
SUBTOTAL of Receipts This Page (optional)	>	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate for each categ Detailed Sumi	ory of the	FOR LINE NUMBER: PAGE 111 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or us name and address of any politi	sed by any persor cal committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Ms. Cynthia Friedewald			Date of Receipt
	Mailing Address 10220 SW 12th Street			12 21 7 2007
	City	State Zip Code		Transaction ID: 14862791
	Pembroke Pines	FL 33025-4701		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Memorial Healthcare System	Occupation Chief Nurse Executive		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00	
— В.	Full Name (Last, First, Middle Initial) Ms. Martha Garcia			Date of Receipt
	Mailing Address 7800 Sheridan Street			1 2 D D / Y Y Y Y Y Y Y Y 2 0 0 7
	City	State Zip Code		Transaction ID: 14862792
	Pembroke Pines	FL 33024-2536	<u> </u>	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Memorial Hospital Pembroke	Occupation Administrator		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00	
_ С.	Full Name (Last, First, Middle Initial) Ms. Mary M. Guaracino, RN			Date of Receipt
	Mailing Address 140 Commodore Drive Apt. 710			12 21 2007
	City	State Zip Code		Transaction ID: 14862794
	Plantation 550 IB	FL 33325-2691		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Memorial Regional Hospital	Occupation Nursing Director		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0 0 0 0	250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 305 (check only one) X
Any information copied from sur or for commercial purposes, oth	ch Reports and Statements ma ner than using the name and a	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In American Hospital Asso	•		
Full Name (Last, First, Midd Ms. Margaret Hansen	,		Date of Receipt
	W 68th Court		12 21 2007
City Parkland	State FL	Zip Code	Transaction ID: 14862795
FEC ID number of contributi federal political committee.		33076-2905	Amount of Each Receipt this Period 625.00
Name of Employer Memorial Healthcare System	Occupati Chief No	on ursing Officer	
Receipt For: Primary Gen Other (specify) ▼		te Year-to-Date ▼ 750.00	
Full Name (Last, First, Midd Mr. Frederick Herold Mailing Address 3681 N.	le Initial) 54th Avenue		Date of Receipt
	J+III Avenue		1 2 1 2 0 0 7
City	State	Zip Code	Transaction ID: 14862801
Hollywood FEC ID number of contributi federal political committee.	FL C	33021-2339	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System	Occupati Medical	on Director	
Receipt For: Primary Gen Other (specify) ▼		te Year-to-Date ▼ 250.00	
Full Name (Last, First, Midd Mr. C Kennon Hetlage	le Initial)		Date of Receipt
	th Flamingo Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14862804
Pembroke Pines	FL	33028-1006	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	C		750.00
Name of Employer Memorial Hospital West	Occupati Adminis		
Receipt For: Primary Gen Other (specify) ▼		te Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This	Page (optional)		1625.00
TOTAL This Period (last page		.	

	LE A (FEC Form 3X) O RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 305 (check only one) X
or for commerc	n copied from such Reports and St cial purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	atements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. A Hugh Mailing Add City Jacksonv FEC ID nur federal polit Name of Er Baptist Hea	ille mber of contributing tical committee. mployer alth		Zip Code 32207-8202 In and Chief Executive Office Year-to-Date ▼ 1045.00	Date of Receipt M M D D 2 1 2 0 0 7
Full Name (Mr. Steven F Mailing Add City Fort Laud FEC ID nur federal polit	2830 S.W. 19th Terrace Unit C lerdale mber of contributing tical committee. mployer regional Hospital	State FL C Occupatio Director	Zip Code 33315-2720	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 1 2 0 0 7 Transaction ID: 14862816 Amount of Each Receipt this Period 250.00
Full Name (Mr. Gary S E Mailing Add City Hollywood FEC ID nur federal polit	(Last, First, Middle Initial) Barber dress 3501 Johnson Street d mber of contributing tical committee. mployer lealthcare System	State FL C Occupatio General	Counsel	Date of Receipt M M M
Prima Other			e Year-to-Date ▼ 250.00	1522.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathe	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Mr. John E. Callender			Date of Receipt
Mailing Address 2743 Elginfield Road	d		12 20 2007
City	State	Zip Code	Transaction ID: 14862946
Upper Arlington FEC ID number of contributing federal political committee.	C	43220-4247	Amount of Each Receipt this Period 775.00
Name of Employer Ohio Hospital Association	Occupatio Senior V	n ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley			Date of Receipt
Mailing Address 257 Clouse Lane			1 2 2 0 7 2 0 0 7
City Granville	State OH	Zip Code 43023-1428	Transaction ID: 14862947
FEC ID number of contributing federal political committee.	C	45025-1420	Amount of Each Receipt this Period 625.00
Name of Employer Ohio Hospital Association	Occupatio	n ice President	
Receipt For: Primary General		e Year-to-Date ▼	_
Primary General Other (specify) ▼		1250.00	
Full Name (Last, First, Middle Initial) Ms. Bridget A. Gargan			Date of Receipt
Mailing Address 54 West Weisheime	r Road		12 20 7 2007
City	State	Zip Code	Transaction ID: 14862948
Columbus FEC ID number of contributing federal political committee.	C	43214-2545	Amount of Each Receipt this Period 250.00
Name of Employer Ohio Hospital Association	Occupatio Director,	n Government Affairs	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1650.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Charles Cataline Mailing Address 111 E. Frankfort St. City Columbus FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association	State Zip Code OH 43206-2011 C Occupation Chief Executive Officer	Date of Receipt 1 2 2 0 2 0 0 7 Transaction ID: 14862970 Amount of Each Receipt this Period 125.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James R. Castle Mailing Address 815 Gatehouse Lane		Date of Receipt 1 2 2 0 2 0 7
City	State Zip Code	Transaction ID: 14862976
Columbus FEC ID number of contributing federal political committee.	OH 43235-1733	Amount of Each Receipt this Period 500.00
Name of Employer Ohio Hospital Association	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Susan Stanfield		Date of Receipt
Mailing Address 6218 Muirlock Court		1 2 2 0 2 0 0 7
City	State Zip Code	Transaction ID: 14862978
Dublin	OH 43017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Ohio Hospital Association	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Keiser Mailing Address 2237 Bryden Road		Date of Receipt
City	State Zip Code	1 2 2 0 7 2 0 0 7 Transaction ID: 14862979
Bexley	OH 43209-1612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Mary M. Yost		Date of Receipt
Mailing Address 924 Riva Ridge Bouler		12 20 7 2007
City	State Zip Code	Transaction ID: 14862982
<u>Gahanna</u>	OH 43230-3825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Vice President, Public Affairs	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Mary L. Gallagher		Date of Receipt
Mailing Address 155 East Broad Street 15th Floor		12 20 7 2007
City	State Zip Code	Transaction ID: 14862985
Columbus	OH 43215-3609	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 305 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Dr. David Engler, PhD			Date of Receipt
	Mailing Address 323 Pebble Creek Driv			12 20 7 2007
	City Dublin	State OH	Zip Code 43017-1370	Transaction ID: 14862987 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Ohio Hospital Association	Occupatio Sr. Dir. D	n Data Services & V.P. REF	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Richard Sites	1		Date of Receipt
	Mailing Address 1312 Smallwood Drive	9		12 20 2007
	Calumbus	State OH	Zip Code	Transaction ID: 14862988
	Columbus FEC ID number of contributing federal political committee.	C	43235-2503	Amount of Each Receipt this Period 125.00
	Name of Employer Ohio Hospital Association	Occupatio Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Dr. John D. Clough, MD			Date of Receipt
	Mailing Address 1760 Carriage Place			12 20 2007
	City	State	Zip Code	Transaction ID: 14862997
	Gates Mills FEC ID number of contributing federal political committee.	OH C	44040-9755	Amount of Each Receipt this Period 500.00
	Name of Employer Cleveland Clinic Foundati- on	Occupatio Director	of Health Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
		1		875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William W Harding Mailing Address 659 Boulevard City Dover FEC ID number of contributing federal political committee. Name of Employer Union Hospital Receipt For:	State Zip Code OH 44622-2077 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Richard F Castrop	1000.00	Date of Receipt
Mailing Address 55 Hospital Drive City Athens FEC ID number of contributing federal political committee.	State Zip Code OH 45701-2302	Transaction ID: 14862999 Amount of Each Receipt this Period 100.00
Name of Employer O'Bleness Memorial Hospit- al Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 450.00	
Full Name (Last, First, Middle Initial) Ms. Catherine B. Johnson, RN Mailing Address 8390 North West 24th	Court	Date of Receipt 1 2 2 1 2 0 0 7
City Pembroke Pines FEC ID number of contributing	State Zip Code FL 33024	Transaction ID: 14865218 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer Memorial Hospital West	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	· • • • • • • • • • • • • • • • • • • •	850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Regginald L. Jordan Mailing Address 5510 S.W. 21st Stree City Hollywood FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital Pembroke Receipt For: Primary General Other (specify)	State Zip Code FL 33023-3116 C Occupation Associate Administrator Aggregate Year-to-Date 300.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Ray Kendrick Mailing Address 5838 NW 125th Terra City Coral Springs	ce State Zip Code FL 33076-3482	Date of Receipt 1 2
FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify)	Occupation Chief HR Officer Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Mr. Fred Keroff Mailing Address 2883 East Lake Vista	Circle	Date of Receipt 1 2 2 1 2 0 0 7
City Davie FEC ID number of contributing federal political committee.	State Zip Code FL 33328-1127	Transaction ID: 14865222 Amount of Each Receipt this Period 1000.00
Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional) .		1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Anthony C. Krayer, III		Date of Receipt
Mailing Address 6051 North Ocean Driv #14405		12 21 2007
City Hollywood	State Zip Code FL 33019-4620	Transaction ID: 14865223 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Memorial Healthcare System	Occupation Chief Administrative Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr Stanley Marks, , M.D.		Date of Receipt
Mailing Address 3501 Johnson Street		1 2 D / Y Y Y Y Y Y 2 0 0 7
City	State Zip Code	Transaction ID: 14865228
Pembroke Pines	FL 33021-5421	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Memorial Healthcare System	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Rosha McCoy		Date of Receipt
Mailing Address 8960 North Lake DAsh	na Drive	1 2 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Plantation</u>	State Zip Code FL 33324-3021	Transaction ID: 14865230
FEC ID number of contributing federal political committee.	FL 33324-3021	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System	Occupation Director of Medical Affaris	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Matthew J Muhart Mailing Address 5945 Pinewood Avenu City Parkland FEC ID number of contributing federal political committee.	State Zip Code FL 33067-3707	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Christopher Perry Mailing Address 5131 SW 168 Avenue		Date of Receipt 1 2 2 1 2 0 0 7
City S.W. Ranches	State Zip Code FL 3331	Transaction ID: 14865241
FEC ID number of contributing federal political committee.	FL 3331	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Healthcare System	Occupation Director, HR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jay E Piriz		Date of Receipt
Mailing Address 3501 Johnson Street		12 21 2007
City	State Zip Code	Transaction ID: 14865243
Hollywood FEC ID number of contributing federal political committee.	FL 33021-5421	Amount of Each Receipt this Period 500.00
Name of Employer Memorial Regional Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1	1250.00

City State Zip Code Fort Lauderdale FL 33391-3760 FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify) ▼ City State Zip Code FEC ID number of contributing 250.00 Transaction ID: 14865246 Amount of Each Receipt this Period Administrator, External Affairs Receipt For: Primary General Other (specify) ▼ City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code Primary General Other (specify) ▼ City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code Primary General Other (specify) ▼ City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code Transaction ID 148		CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mr. Joseph P. Relly Mailing Address 1740 NE First Street City State Zip Code Fort Lauderdale FL 33301-3760 FEC ID number of contributing federal political committee. Name of Ernployer Memorial Regional Hospital Mailing Address 2445 N. 37th Avenue City State Zip Code Primary General Other (specify) ▼ State Zip Code Primary General Other (specify) ▼ State Zip Code Primary State Zip Code Primary General Other (specify) ▼ State Zip Code Primary General Other (specify) ▼ State Zip Code Primary General Other (specify) ▼ Date of Receipt Mamount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Director of Compliance & Audit Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865248 Amount of Each Receipt this Period Transaction ID: 14865248 Transaction ID: 14865248 Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865247 Amount of Each Receipt this Period Transaction ID: 14865248 Transaction ID: 14865248 Transaction ID: 14865248 Transaction ID: 14865248 Transaction ID: 14865247 Transaction ID: 14	An	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Receipt For: Primary	∠ . A .	Mr. Joseph P. Reilly Mailing Address 1740 NE First Street City Fort Lauderdale FEC ID number of contributing	FL	•	1 2 2 1 2 0 0 7 Transaction ID: 14865246
Mailing Address 2445 N. 37th Avenue City State Zip Code FL 33021-3604 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital City State Zip Code FL 33021-3604 Receipt For: Aggregate Year-to-Date ▼ Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. City State Zip Code FL 300.00 Date of Receipt Transaction ID: 14865247 Amount of Each Receipt this Period Footnote Flore		Receipt For: Primary General	Administ	trator, External Affairs e Year-to-Date ▼ 250.00	
Hollywood FL 33021-3604 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Zeff Ross Mailing Address 703 North Flamingo Road City State Zip Code FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Senior Vice President, Operations Receipt For: Primary General Occupation Senior Vice President, Operations Receipt For: Primary General Other (specify) ▼ 1000.00	3.	Mr. Kenneth P. Resmini			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital		•		Zip Code	Transaction ID: 14865247
Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Zeff Ross Mailing Address 703 North Flamingo Road City State Zip Code Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Occupation Director of Compliance & Audit Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 14865248 Amount of Each Receipt this Period C C 1000.00		•	FL	33021-3604	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Zeff Ross Mailing Address 703 North Flamingo Road City State Zip Code Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 1750.00		federal political committee.			500.00
Receipt For: Primary General Sould State Sould S		Mame of Employer Memorial Regional Hospital			
Mailing Address 703 North Flamingo Road City State Zip Code Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Senior Vice President, Operations Receipt Transaction ID: 14865248 Amount of Each Receipt this Period 1000.00 Cupation Senior Vice President, Operations Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		Primary General		e Year-to-Date ▼	
City Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary Other (specify) ▼ State Zip Code FL 33028-1006 Transaction ID: 14865248 Amount of Each Receipt this Period 1000.00 Aggregate Year-to-Date ▼ 1000.00	 ;.	,			Date of Receipt
City Pembroke Pines FL 33028-1006 FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary Other (specify) ▼ State Zip Code FL 33028-1006 Amount of Each Receipt this Period 1000.0 C 1000.0		Mailing Address 703 North Flamingo Ro	oad		
FEC ID number of contributing federal political committee. Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) Occupation Senior Vice President, Operations Aggregate Year-to-Date 1000.00		City	State	Zip Code	
Name of Employer Memorial Hospital West Receipt For: Primary Other (specify) ▼ Occupation Senior Vice President, Operations Aggregate Year-to-Date ▼ 1000.00		Pembroke Pines	FL	33028-1006	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			C		1000.00
Primary General Other (specify) ▼ 1000.00			Senior V	ice President, Operations	
1750.0		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)	s	UBTOTAL of Receipts This Page (optional)			1750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 305 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Frank V Sacco, , FACHE			Date of Receipt
	Mailing Address 3501 Johnson Street	Otata	7's Oads	12 21 2007
	City <u>Hollywood</u>	State FL	Zip Code 33021-5487	Transaction ID: 14865249 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Memorial Healthcare System	Occupation President	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Ms Judy Sada	1		Date of Receipt
	Mailing Address 1901 SW 172nd Aven	ue		12 21 2007
	City Miramar	State FL	Zip Code 33029-5592	Transaction ID: 14865250
	FEC ID number of contributing federal political committee.	C	33029-3392	Amount of Each Receipt this Period 250.00
	Name of Employer Memorial Hospital Miramar	Occupation Chief Fin	n ancial Officer	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
_ c.	Full Name (Last, First, Middle Initial) Mr. Scott Singer			Date of Receipt
	Mailing Address 11155 SW 5th Place			1 2 2 1 2 0 0 7
	City Hollywood	State FL	Zip Code 33025-6957	Transaction ID: 14865262
	FEC ID number of contributing federal political committee.	C	33023-0937	Amount of Each Receipt this Period 250.00
	Name of Employer Memorial Healthcare System	Occupation Administ		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			1500.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr David Smith		Date of Receipt
Mailing Address 3501 Johnson Street	State Zip Code	12 21 2007
City Hollywood	FL 33021-5421	Transaction ID: 14865264 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Memorial Regional Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Joseph Stuczynski		Date of Receipt
Mailing Address 7800 Sheridan Street		12 21 2007
City	State Zip Code	Transaction ID: 14865266
Pembroke Pines	FL 33024-2536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Hospital Pembroke	Occupation CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms Deborah Tedder, RN	•	Date of Receipt
Mailing Address 3501 Johnson Street		12 21 2007
City	State Zip Code	Transaction ID: 14865267
Hollywood	FL 33021-5421	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Memorial Regional Hospital	Occupation Chief Operating Officer and Chief Nurs	s
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	1100.00
TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	λ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 305 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Ms. Tammy Tucker			Date of Receipt
Mailing Address 9631 Ridgeside Cou	urt		M M / D D / Y Y Y Y Y 1 1 2 1 2 1 2 0 0 7
City Davie	State FL	Zip Code 33328-6907	Transaction ID: 14865268
FEC ID number of contributing federal political committee.	C	33328-0907	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Regional Hospital	Occupation Associate	n e Administrator	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Nina Tucker Beauchesne			Date of Receipt
Mailing Address 3115 N. 36th Avenu	ıe		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hollywood	State FL	Zip Code 33021-3062	Transaction ID: 14865269
FEC ID number of contributing federal political committee.	C	33021-3002	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Regional Hospital	Occupation Administr		_
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Felicia Turnley			Date of Receipt
Mailing Address 5212 NW 67th Aver	nue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14865270
Lauderhill FEC ID number of contributing federal political committee.	C	33319-7226	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Hospital West	Occupation Administr	n rative Director, Cancer Servi	ic
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		750.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. G Mark O'Bryset Malling Address 1300 Miccosukee Road City State Zip Code FL 32398-5054 FEC ID number of contributing federal political committee. Cupation Titlehassee Memorial Heal- Iblans Prices Memorial Heal- Iblans Cast, First, Middle Initial) Ms. Maggie Wigeands Ms. Maggie Wigeands FEL 3309-5054 FIL Name (Last, First, Middle Initial) Ms. Maggie Wigeands Ms. Maggie Wigeands FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code FEC ID number of contributing federal political committee. City State Zip Code Finansection ID: 14865277 Amount of Each Receipt his Period Transaction ID: 14865277 Amount of Each Receipt his Period Date of Receipt Transaction ID: 14865277 Transaction ID: 14865277 Amount of Each Receipt his Period Date of Receipt Transaction ID: 14865277 Transaction ID: 1486787 Amount of Each Receipt his Period Date of Receipt Transaction ID: 1486787 Transac	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Mailing Address 1300 Miccosukee Road City State Zip Code Tallahassee FL 32308-5054 FEC ID number of contributing federal political committee. C	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial Heal-thGare Receipt For: Aggregate Year-to-Date ▼ 1000.00	Mr. G Mark O'Bryant Mailing Address 1300 Miccosukee Road		12 21 2007
th Care	FEC ID number of contributing		
Ms. Maggie Wiegandt Mailing Address 19260 SW 30th Street City State Zip Code FL 33029-5817 FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼ City State Zip Code FL 33029-5817 Full Name (Last, First, Middle Initial) Mr. Nemuel O Artiles, FACHE Mailing Address Post Office Box 859 FEC ID number of contributing federal political committee. City State Zip Code PR 00792-0859 FEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Redentor. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 14865778 Amount of Each Receipt this Period Executive Director Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	thCare Receipt For: Primary General	President and Chief Executive Office Aggregate Year-to-Date ▼ 1000.00	cer
City State Zip Code FL 33029-5817 Miramar FL 33029-5817 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼ City State Zip Code Humacao PR 00792-0859 FEC ID number of contributing federal political committee. Date of Receipt Milling Address Post Office Box 859 Date of Receipt Transaction ID: 14865277 Amount of Each Receipt this Period Date of Receipt Milling Address Post Office Box 859 Date of Receipt Transaction ID: 14865778 Amount of Each Receipt this Period City State Zip Code PR 00792-0859 FEC ID number of contributing federal political committee. City Primary General Occupation Executive Director Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Ms. Maggie Wiegandt		M " M / D " D / Y " Y " Y " Y
FEC ID number of contributing federal political committee. Name of Employer Memorial Healthcare System Receipt For: Primary General Other (specify) ▼ City State Zip Code PR 00792-0859 FEC ID number of contributing federal political committee. PEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Receipt Primary General Other (specify) ▼ City State Zip Code PR 00792-0859 City State Zip Code PR 00792-0859 Cupation Executive Director Receipt Transaction ID: 14865778 Amount of Each Receipt this Period Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	City	State Zip Code	
Asst. Administrator	FEC ID number of contributing		
Receipt For:	Name of Employer Memorial Healthcare System	·	
Mr. Nemuel O Artiles, , FACHE Mailing Address Post Office Box 859 City State Zip Code Humacao PR 00792-0859 FEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Redentor Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M	Primary General	Aggregate Year-to-Date ▼	
City Humacao PR 00792-0859 FEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Redentor Receipt For: Primary Other (specify) ▼ State Zip Code PR 00792-0859 Amount of Each Receipt this Period C 250.00 12 31 2007 Transaction ID: 14865778 Amount of Each Receipt this Period 250.00			Date of Receipt
Humacao FEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Redentor Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period C 250.00 Amount of Each Receipt this Period 250.00	Mailing Address Post Office Box 859		
FEC ID number of contributing federal political committee. Name of Employer Hospital Episcopal Cristo Redentor Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	•	'	
Hospital Episcopal Cristo Redentor Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	FEC ID number of contributing		
Primary General Other (specify) ▼ 250.00	Hospital Episcopal Cristo Redentor	Executive Director	
SUBTOTAL of Receipts This Page (ontional)	Primary General		
SOBTOTAL OF TICCOPIS THIS Fage (optional)	SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Cheryn N. Baker Mailing Address 116 Woodgreen Cros City Madison FEC ID number of contributing federal political committee. Name of Employer Mississippi Hospital Association	State Zip Code MS 39110-4522 C Occupation Vice President for Government Relation	Date of Receipt M M
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 253.50	
Full Name (Last, First, Middle Initial) Mr. James D. Baker Mailing Address 3516 N. River Ridge I)rive	Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14866178
D'Iberville FEC ID number of contributing federal political committee.	MS 39540	Amount of Each Receipt this Period 75.00
Name of Employer Community Health Systems Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne		Date of Receipt
Mailing Address 424 Autumn Oak Driv	е	1 2 1 7 2 0 0 7
City Madison	State Zip Code MS 39110-9148	Transaction ID: 14866179 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HPI Company	Occupation President and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		402.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Mary Curtis Mailing Address PO Box 1288 City Prentiss FEC ID number of contributing federal political committee. Name of Employer Jefferson Davis Community Hospital Receipt For: Primary General	State Zip Code MS 39474-1288 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt 1 2 1 7 2 0 0 7 Transaction ID: 14866181 Amount of Each Receipt this Period 150.00
Full Name (Last, First, Middle Initial) Mr. Charles L Denton Mailing Address 960 Avent Drive	550.00	Date of Receipt 1 2 1 7 2 0 0 7
City Grenada FEC ID number of contributing federal political committee. Name of Employer Grenada Lake Medical Cent-	State Zip Code MS 38901-5230 C Occupation Chief Executive Officer	Transaction ID: 14866182 Amount of Each Receipt this Period 75.00
er Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) J.W. Jones Mailing Address 3637 Parkway Blvd		Date of Receipt 12 17 2007
City <u>Meridian</u>	State Zip Code MS 39305-3869	Transaction ID: 14866187 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jeff Anderson Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l)	475.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Arthur C Kelly Mailing Address Drawer 1506 City Starkville FEC ID number of contributing federal political committee. Name of Employer Oktibbeha County Hospital Receipt For: Primary General	State Zip Code MS 39760-1506 C Occupation Administrator and Chief Executive Off Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Marcella McKay Mailing Address 322 Helmsley Drive City	250.00 State Zip Code	Date of Receipt M
Brandon FEC ID number of contributing federal political committee. Name of Employer Mississippi Hospital Association Receipt For: Primary General Other (specify)	Occupation President & CEO, MHA Health Found Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Julie McNeese Mailing Address 116 Woodgreen Cr	rossing State Zip Code	Date of Receipt M
Madison FEC ID number of contributing federal political committee.	MS 39110-4522	Amount of Each Receipt this Period
Name of Employer Mississippi Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President, MHA/DSI Aggregate Year-to-Date ▼ 264.50	
SUBTOTAL of Receipts This Page (optional	al)	610.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 305 (check only one) X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
M. <u>M</u>	ull Name (Last, First, Middle Initial) r. Kurt W Metzner ailing Address 1225 North State Stree	et		Date of Receipt 1 2 1 7 2 0 0 7
Ci	ty ackson	State MS	Zip Code 39202-2064	Transaction ID: 14866193
FE	EC ID number of contributing deral political committee.	C	39202-2004	Amount of Each Receipt this Period 800.00
<u>S</u> y	ame of Employer ississippi Baptist Health /stem eceipt For: Primary General Other (specify)		and Chief Executive Office Year-to-Date ▼ 2400.00	r]
B. <u>M</u>	Ill Name (Last, First, Middle Initial) r. M Kenneth Posey, , FACHE ailing Address P O Box 527			Date of Receipt
Ci	ty	State	Zip Code	Transaction ID: 14866196
FE	ay Springs EC ID number of contributing deral political committee.	MS C	39422-0527	Amount of Each Receipt this Period 250.00
Na Ja	ame of Employer sper General Hospital	Occupation Administr		
Re	eceipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
	III Name (Last, First, Middle Initial) s Debbie Shearer			Date of Receipt
_	ailing Address P O Box 16389			1 2 1 7 2 0 0 7
Ci	ty	State	Zip Code	Transaction ID: 14866197
FE	attiesburg EC ID number of contributing deral political committee.	MS C	39404-6389	Amount of Each Receipt this Period 125.00
Na Fo	ame of Employer orrest General Hospital	Occupation Director o	f Government Relations	
Re	eceipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
SUB	TOTAL of Receipts This Page (optional)			1175.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Wallace Strickland Mailing Address 1314 19th Avenue City	State	Zip Code	Date of Receipt M
Meridian FEC ID number of contributing federal political committee.	MS C	39301-4116	Amount of Each Receipt this Period 250.00
Name of Employer Rush Health Systems Receipt For: Primary General Other (specify) ▼	- ' '	t and Chief Executive Officer Year-to-Date 250.00]
Full Name (Last, First, Middle Initial) Mr. Eddie L. Foster Mailing Address 116 Woodgreen C	rossing		Date of Receipt 1 2 1 7 2 0 0 7
City	State	Zip Code	Transaction ID: 14866202
<u>Madison</u>	MS	39110-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Mississippi Hospital Asso- ciation		erating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]
Full Name (Last, First, Middle Initial) Mr. Lawrence Graeber Mailing Address 124 E. Waterwood	d Drive		Date of Receipt 1 2 1 7 2 0 0 7
City	State	Zip Code	Transaction ID: 14866203
Brandon	MS	39047-6527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer University Hospitals and Clinics, Univ Receipt For:	- + +	ecutive Officer	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 355.00	
SUBTOTAL of Receipts This Page (option	nal)		675.00

or for commercial purp	oses, other than using the na TTEE (In Full) tal Association PAC rst, Middle Initial) r.	ements may ame and add	not be sold or used by any pers ress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospi Full Name (Last, Fi Mr. John J Finan, , J	rst, Middle Initial)			
Mr. John J Finan, , J	r			
Mailing Address	1200 Feedn Land			Date of Receipt
	+200 Essen Lane			12 / 31 / 2007
City Baton Rouge		State LA	Zip Code 70809-2196	Transaction ID: 14866314 Amount of Each Receipt this Period
FEC ID number of federal political con		C	70003 2130	1000.00
Name of Employer Franciscan Mission of Our Lady He	naries	Occupation President	and Chief Executive Office	
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, Fi	MPA			Date of Receipt
Mailing Address	9521 Brookline Avenue			12 31 7 2007
City		State LA	Zip Code	Transaction ID: 14866315
Baton Rouge FEC ID number of federal political con		C	70809-8409	Amount of Each Receipt this Period 90.00
Name of Employer Louisiana Hospital ation	Associ-	Occupation Senior Vic	ce President	
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 590.00	
Full Name (Last, Fi				Date of Receipt
Mailing Address	17315 Curry Ln			12 20 2007
City		State	Zip Code	Transaction ID: 14866605
Chagrin Falls FEC ID number of federal political con		C	44023-5578	Amount of Each Receipt this Period 500.00
Name of Employer University Hospital ga Regional H	s Geau-	Occupation President	and Chief Executive Office	er e
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Recei	pts This Page (optional)			1590.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person le name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Archilles A. Demetriou Mailing Address 1954 Epping Road City Gates Mills FEC ID number of contributing federal political committee. Name of Employer University Hospitals Geneva Medical Ce Receipt For: Primary General	State Zip Code OH 44040-9680 C Occupation CEO Aggregate Year-to-Date ▼	Date of Receipt 1 2
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy E. Paton Mailing Address 8133 Black Oak Drive City	State Zip Code	Date of Receipt 1 2 2 0 7 Transaction ID: 14866608
Lambertville FEC ID number of contributing federal political committee. Name of Employer Oakwood Healthcare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Chief, Marketing and Communications Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr Kevin V Roberts Mailing Address 11100 Euclid Avenue City Cleveland FEC ID number of contributing federal political committee. Name of Employer	State Zip Code OH 44106-1716 C	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 0 7 Transaction ID: 14866609 Amount of Each Receipt this Period 250.00
Name of Employer University Hospitals Receipt For: Primary General Other (specify) ▼	Sr. Vice President & CFO Aggregate Year-to-Date 250.00	_
SUBTOTAL of Receipts This Page (optional)	<u></u>	1000.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mished L. Garland Mailing Address 5958 Heather Lane City State Zip Code Hudson OH 44236-4325 FEC ID number of contributing federal political committee. C primary General Other (specify) ▼ 250.00 Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: 14866612 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code Primary General Other (specify) ▼ 250.00 Date of Receipt Transaction ID: 14866613 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Cocupation University Mospitals Bedf- Ord Medical Committee. Primary General Other (specify) ▼ 250.00 FULL Name (Last, First, Middle Initial) Mr. Charles D Beaman, Jr. Mailing Address P O Box 2266 City State Zip Code FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866613 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866617 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866617 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866617 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866617 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. C Journal Date of Receipt Transaction ID: 14866617 Amount of Each Rece	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 5958 Heather Lane City State Zip Code OH 44236-4325 FEC ID number of contributing federal political committee. Name of Employer University Hospitals Bedford Contributing federal political committee. Full Name (Last, First, Middle Initial) Mr. Sean McKibben Mailing Address 44 Blaine Avenue City State Zip Code OH 44146-2709 Full Name (Last, First, Middle Initial) Mr. Sean McKibben Mailing Address 44 Blaine Avenue City State Zip Code OH 44146-2709 FEC ID number of contributing federal political committee. C Cocupation Vice President Aggregate Year-to-Date ▼ Date of Receipt Time Period Date	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sean McKibben Malling Address 44 Blaine Avenue City Cleveland OH 44146-2709 Name of Employer University Hospitals Bedford Receipt Other (specify) ▼ City Cleveland Date of Receipt Transaction ID: 14866613 Amount of Each Receipt this Period C Cocupation President Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Charles D Beaman, Jr. Mailing Address P O Box 2266 FEC ID number of contributing federal political committee. C State Zip Code State Zip Code FEC ID number of contributing federal political committee. C State Zip Code FEC ID number of contributing federal political committee. C State Zip Code FEC ID number of contributing federal political committee. C State Zip Code FEC ID number of contributing federal political committee. C State Zip Code FEC ID number of contributing federal political committee. C Sc 29202-2266 Fec ipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ State Sip Code State Sign Sign Sign Sign Sign Sign Sign Sign	Ms. Heidi L. Gartland Mailing Address 5958 Heather Lane City Hudson FEC ID number of contributing federal political committee. Name of Employer University Hospitals Receipt For: Primary General	OH 44236-4325 C Occupation Vice President, Government Affairs Aggregate Year-to-Date 250.00	Transaction ID: 14866612 Amount of Each Receipt this Period
Mr. Charles D Beaman, , Jr. Mailing Address P O Box 2266 City State Zip Code Columbia SC 29202-2266 FEC ID number of contributing federal political committee. Name of Employer Palmetto Health President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 14866617 Amount of Each Receipt this Period 500.00	Full Name (Last, First, Middle Initial) Mr. Sean McKibben Mailing Address 44 Blaine Avenue City Cleveland FEC ID number of contributing federal political committee. Name of Employer University Hospitals Bedford Medical C Receipt For: Primary General	State Zip Code OH 44146-2709 C Occupation President Aggregate Year-to-Date ▼	Transaction ID: 14866613 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	Mr. Charles D Beaman, , Jr. Mailing Address P O Box 2266 City Columbia FEC ID number of contributing federal political committee. Name of Employer Palmetto Health Receipt For: Primary General	SC 29202-2266 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	Transaction ID: 14866617 Amount of Each Receipt this Period 500.00
	SUBTOTAL of Receipts This Page (optional)	>	1000.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association F	s and Statements may not be sold or used by any personing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Rebecca T Brewer, FACHE Mailing Address 40100 Highway 2 City Davenport FEC ID number of contributing federal political committee. Name of Employer Colleton Medical Center Receipt For: Primary General Other (specify)	State Zip Code SC 29488-0005 C Occupation CEO Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Timothy Browne Mailing Address 3655 Mitchell St. City Loris FEC ID number of contributing federal political committee. Name of Employer Loris Community Hospital Receipt For: Primary General	Box 690001 State Zip Code SC 29569-2827 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Ms. Anita M Butler Mailing Address 389 Serpentine I City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Hospital for Restorative C Receipt For: Primary General Other (specify)		Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (opti	onal)	625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 305 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David Church Mailing Address 906 Old Wagon Road City Inman FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Heal-thcare System	State Zip Code SC 29349 C Occupation Dir., Business Ops & Marketing Hom	Date of Receipt 1 2 3 1 2 0 0 7 Transaction ID: 14866621 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Philip A Clayton Mailing Address P O Box 829		Date of Receipt 1 2
City	State Zip Code	Transaction ID: 14866622
Conway FEC ID number of contributing federal political committee. Name of Employer	SC 29528-0829 C Occupation	Amount of Each Receipt this Period 250.00
Conway Medical Center Receipt For: Primary General Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	<u>, </u>
Full Name (Last, First, Middle Initial) Mr Howell Clyborne		Date of Receipt
Mailing Address 701 Grove Road		12 31 2007
City <u>Gree</u> nville	State Zip Code SC 29605-4211	Transaction ID: 14866623
FEC ID number of contributing federal political committee.	C 29005-4211	Amount of Each Receipt this Period 250.00
Name of Employer Greenville Hospital System	Occupation Vice President Community and Gove	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	•	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr Dan Corrigan		Date of Receipt
	Mailing Address 800 North Fant Street		12 31 7 2007
	City Anderson	State Zip Code SC 29621-5708	Transaction ID: 14866624
	FEC ID number of contributing federal political committee.	SC 29621-5708	Amount of Each Receipt this Period 125.00
	Name of Employer AnMed Health Medical Cent- er	Occupation Senior Director Communications	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Richard E D'Alberto, , FACHE Mailing Address P O Box 976		Date of Receipt
			12 31 2007
	City	State Zip Code	Transaction ID: 14866625
	Clinton FEC ID number of contributing federal political committee.	SC 29325-0976	Amount of Each Receipt this Period 250.00
	Name of Employer Laurens County Healthcare System	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. J. David de Holl, MD	<u> </u>	Date of Receipt
	Mailing Address 800 No Fant Street		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 14866626
	Anderson	SC 29621-5793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer AnMed Health Medical Cent- er	Occupation VP, Medical Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .	1	500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr Gene Dickerson, , M.D. Mailing Address 129 North Washington	on Street	Date of Receipt
City Sumter	State Zip Code SC 29150-4983	Transaction ID: 14866627 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Tuomey Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Vice President of Medical Affairs Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Dorman Mailing Address 701 Grove Road		Date of Receipt 1 2 3 1 2 0 0 7
City	State Zip Code	Transaction ID: 14866628
Greenville	SC 29605-5611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Hospital System	Occupation VP Hum Res & Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James T. Douglas		Date of Receipt
Mailing Address 800 North Fant Stree	t	12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Anderson	State Zip Code SC 29621-5793	Transaction ID: 14866629
FEC ID number of contributing federal political committee.	C 29021-3/93	Amount of Each Receipt this Period 125.00
Name of Employer AnMed Health Medical Cent- er	Occupation VP, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Provints This Prove (autional)		525.00

SCHEDULE A	A (FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 305 (check only one) X
or for commercial pu	rposes, other than using the n	atements may name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Mr. J Larry Dozier, Mailing Address City Winnsboro FEC ID number of federal political co	P O Box 620 f contributing ommittee.	1	Zip Code 29180-0620 cutive Officer Year-to-Date ▼	Date of Receipt M M D D 2 0 0 7 Transaction ID: 14866630 Amount of Each Receipt this Period 250.00
Mr. Paul K. Duane	First, Middle Initial)	0 0	500.00	Date of Receipt
City Columbia FEC ID number of federal political columbia Name of Employe Palmetto Health Receipt For: Primary	ommittee.		Zip Code 29202-2266 Vice President and Chief F Year-to-Date ▼	Transaction ID: 14866631 Amount of Each Receipt this Period 250.00
Full Name (Last, Ms Doran Dunawa	First, Middle Initial)		250.00	Date of Receipt 1 2 3 1 2 0 0 7
City Greenville FEC ID number of federal political co		State SC	Zip Code 29605-4211	Transaction ID: 14866632 Amount of Each Receipt this Period 250.00
Name of Employe Greenville Hospit Receipt For: Primary Other (spec	General		ident Information and Techn Year-to-Date ▼ 500.00	nol
SUBTOTAL of Rec	eipts This Page (optional)			750.00

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(Check only only)
or for commercial purp	oses, other than using the name a	nts may not be sold or used by any and address of any political commit	person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
Full Name (Last, Fin Rev Terence K Flem Mailing Address Fally Beach FEC ID number of control of the second	PO Box 357 St	ate Zip Code C 29439-0357	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Roper Hospital Receipt For: Primary Other (specify	mittee. Occ VP Agg	upation for Mission gregate Year-to-Date ▼ 500.0	0
Full Name (Last, Find Mr. Vince Ford Mailing Address	Marrob Court		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbia FEC ID number of of federal political com Name of Employer Palmetto Health Receipt For: Primary Other (specify	contributing mittee. Ccc Sr. Agg	ate Zip Code C 29203-9103 upation Vice President, Community Suregate Year-to-Date ▼	
City Columbia FEC ID number of o	301 Taylor Street Suite 9-A St Scontributing	ate Zip Code C 29201-2942	Date of Receipt M M M / D D M 2 0 0 7 Transaction ID: 14866635 Amount of Each Receipt this Period 300.00
Name of Employer Palmetto Health Ba olumbia Receipt For: Primary Other (specify	otist/C- Occ Sr. Agg	upation Vice President pregate Year-to-Date ▼ 300.0	0
SUBTOTAL of Recei	ots This Page (optional)		800.00

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any or f	r information copied from such Reports and Sor commercial purposes, other than using the	Statements may not be sold or used by any personame and address of any political committee	son for the purpose of soliciting contributions
- I \	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Howard Harrison		Date of Receipt
	Mailing Address 316Calhoun Street	Ctata 7in Coda	12 31 200000
	City Charleston	State Zip Code SC 29401-1113	Transaction ID: 14866636 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 23401 1110	250.00
•	Name of Employer Roper Hospital	Occupation VP, Human Resources	
-	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Lisa Irvin		Date of Receipt
	Mailing Address 159 Harbour Watch W	ay	12 31 2007
	City	State Zip Code	Transaction ID: 14866637
	Mount Pleasant	SC 29464-2827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Roper Hospital	Occupation VP of Nursing	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Ellen Jackson		Date of Receipt
	Mailing Address 316 Calhoun Street		12 / 31 / 2007
	City	State Zip Code	Transaction ID: 14866638
	Charleston FEC ID number of contributing	SC 29401-1113	Amount of Each Receipt this Period 250.00
	federal political committee.		
	Name of Employer Roper Hospital	Occupation VP, Managed Care & Physician Ser	vices
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
	IBTOTAL of Receipts This Page (optional)	1	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Heidi Jameson Mailing Address 211 Shelton Drive City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Medical Center Receipt For: Primary General	State Zip Code SC 29307-2553 C Occupation Director of Marketing Aggregate Year-to-Date	Date of Receipt M M J D D J Z D O 7 Transaction ID: 14866639 Amount of Each Receipt this Period 250.00
Other (specify) Full Name (Last, First, Middle Initial) Ms. Mary Jane Jennings Mailing Address 210 Springlake Road	250.00	Date of Receipt 1 2 3 1 2 0 0 7
City Gaffney FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Healthcare System Receipt For: Primary General Other (specify)	State Zip Code SC 29340-5662 C Occupation Director, Medical Staff Services Aggregate Year-to-Date 250.00	Transaction ID: 14866640 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Matt Meyers Mailing Address 101 E. Wood Street City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Healthcare System Propriet For:	State Zip Code SC 29303-3040 C Occupation VP, Regional Physicians	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 250.00	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Randall G Nyp Mailing Address 101 East Wood Stree City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Heal-thcare System	State Zip Code SC 29303-3016 C Occupation Senior Vice President and Chief Ope	Date of Receipt M M
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr James Raymond, , M.D. Mailing Address P O Box 2266		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14866643
Columbia FEC ID number of contributing federal political committee.	SC 29202-2266	Amount of Each Receipt this Period 250.00
Name of Employer Palmetto Health	Occupation Senior Vice President Medical Educa	tic
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Ms. Renee Romberger		Date of Receipt
Mailing Address 5 Kinglet Court		12 31 2007
City	State Zip Code	Transaction ID: 14866644
Simpsonville FEC ID number of contributing federal political committee.	SC 29681-7221	Amount of Each Receipt this Period 250.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date 250.00	
		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Raymond A. Shingler Mailing Address 429 Carleton Circle City Spartanburg FEC ID number of contributing federal political committee. Name of Employer Spartanburg Regional Healthcare System Receipt For: Primary General Other (specify)	State Zip Code SC 29301-1270 C Occupation Sr. Vice President Information Service Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14866646 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. John Singerling Mailing Address P O Box 2266 City Columbia FEC ID number of contributing federal political committee. Name of Employer Palmetto Health Richland Receipt For: Primary General Other (specify)	State Zip Code SC 29202-2266 C Occupation Executive Vice President and Chief O Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Howard P. West, Esq. Mailing Address 817 Abelia Road City Columbia FEC ID number of contributing federal political committee. Name of Employer Palmetto Health Receipt For: Primary General Other (specify)	State Zip Code SC 29205-2014 C Occupation Sr. Vice President & General Counse Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	• • • • • • • • • • • • • • • • • • •	750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Dr. Jonathan R Bates, , M.D.			Date of Receipt
Mailing Address 800 Marshall Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14867799
Little Rock	AR	72202-3591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		325.00
Name of Employer Arkansas Children's Hospi-	Occupatio Presiden	n t and Chief Executive Office	r
<u>tal</u> Receipt For:	- '	e Year-to-Date ▼	
Primary General Other (specify)	35.154.6	325.00	
Full Name (Last, First, Middle Initial) Mr. Robert Gant	1		Date of Receipt
Mailing Address 25 White Oak Drive			1 2 1 7 2 0 0 7
City	State	Zip Code	Transaction ID: 14867803
Conway	AR	72034-3443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		162.50
Name of Employer Conway Regional Medical Center	Occupatio Board Me		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Doug Weeks			Date of Receipt
Mailing Address 9601 Interstate 630 E	xit 7		12 17 2007
City	State	Zip Code	Transaction ID: 14867812
Little Rock	AR	72205-7299	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		162.50
Name of Employer Baptist Health	Occupatio Sr. Vice	n President & Administrator	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	325.00	
SUBTOTAL of Receipts This Page (optional) .	1		650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any person on the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert J Brody Mailing Address 1805 Braeburn Di City Carmel	rive State Zip Code IN 46032-8364	Date of Receipt M M
FEC ID number of contributing federal political committee.	C Occupation	Amount of Each Receipt this Period 250.00
Name of Employer St. Francis Hospital and Health Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Gary A Fammartino Mailing Address 4213 W. 131st St	reet	Date of Receipt 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14867826
Westfield FEC ID number of contributing federal political committee.	IN 46074-9603	Amount of Each Receipt this Period 250.00
Name of Employer St. Vincent Hospitals and Health Servi Receipt For: Primary General	Occupation Vice President Aggregate Year-to-Date ▼ 250.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial)		
Mr. Thomas J Gryzbek Mailing Address 1335 Capri Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14867831
Dyer FEC ID number of contributing federal political committee.	IN 46311-1324	Amount of Each Receipt this Period 250.00
Name of Employer Saint Margaret Mercy Heal- thcare Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Katherine Humphreys		Date of Receipt
Mailing Address 8425 Harcourt Rd.	State Zip Code	12 28 2007
City Indianapolis	IN 46260-2036	Transaction ID: 14867836 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Hospitals and Health Servi Receipt For: Primary General Other (specify) ▼	Occupation SVP, Government Relations Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Kevin D Leahy Mailing Address 51015 Shamrock Hills	2 Court	Date of Receipt
Mailing Address 51015 Shaffifock Hills	s Court	12 28 2007
City	State Zip Code	Transaction ID: 14867841
Granger	IN 46530-7830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sisters of St. Francis He- alth Services	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Stewart	1	Date of Receipt
Mailing Address 1535 N. Park Ave.		12 28 2007
City	State Zip Code	Transaction ID: 14867848
<u>Indianapolis</u>	IN 46202-2608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Heart Center of Indiana	Occupation Hospital CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .		1000.00
COSTOTAL OF TOCCOPTS THIS LAGE (OPTIONAL).	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Terrance E Wilson Mailing Address 5380 Gardenia Court City West Lafayette FEC ID number of contributing federal political committee. Name of Employer St. Elizabeth Regional Health Receipt For: Primary General Other (specify)	State Zip Code IN 47906-9070 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. James P Alender Mailing Address P O Box 9011 City Kokomo FEC ID number of contributing federal political committee. Name of Employer Howard Regional Health System Receipt For: Primary General Other (specify)	State Zip Code IN 46904-9011 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 14867853 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Robert J Heckert, , Jr. Mailing Address P O Box 760 City Washington FEC ID number of contributing federal political committee. Name of Employer Daviess Community Hospital Receipt For: Primary General Other (specify)	State Zip Code IN 47501-0760 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D D / Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14867874 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person a name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Trina Marlatt Mailing Address 3654 N. 850 E. City Attica FEC ID number of contributing federal political committee. Name of Employer St. Vincent Williamsport Hospital Receipt For:	State Zip Code IN 47918-8041 C Occupation Registered Nurse, Chief Nursing Offic Aggregate Year-to-Date ▼	Date of Receipt M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	250.00	
Dr. Jon D. Rahman, M.D. Mailing Address 418 Burlington Lane		Date of Receipt 1 2 1 0 2 0 0 7
City	State Zip Code IN 46032-9162	Transaction ID: 14867894
Carmel FEC ID number of contributing federal political committee.	IN 46032-9162	Amount of Each Receipt this Period 500.00
Name of Employer St. Vincent Hospitals and Health Servi Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Medical Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ms. Linda E White		Date of Receipt
Mailing Address 600 Mary Street		12 10 2007
City	State Zip Code	Transaction ID: 14867909
Evansville FEC ID number of contributing federal political committee.	IN 47747-0001	Amount of Each Receipt this Period 500.00
Name of Employer Deaconess Health System	Occupation President and Chief Executive Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) .	·	1250.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Guy P. Evans Mailing Address 41 Manitto Place City Oceanport FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Assoc-	State Zip Code NJ 07757-1510 C	Date of Receipt 1 2
New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Vice President Aggregate Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Cres	et Blvd.	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Manasquan FEC ID number of contributing federal political committee.	State Zip Code NJ 08736-4001	Transaction ID: 14868014 Amount of Each Receipt this Period 20.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date 245.00	
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Ro	pad	Date of Receipt
City <u>Langhorne</u> FEC ID number of contributing	State Zip Code PA 19047-2306	1 2 1 4 2 0 0 7 Transaction ID: 14868017 Amount of Each Receipt this Period 20.00
federal political committee. Name of Employer New Jersey Hospital Association	Occupation Vice President, Human Resources	20.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
SUBTOTAL of Receipts This Page (options	al)	60.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. John J. Dawidowski Mailing Address 17 Brookshire Drive City Robbinsville FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NJ 08691-2554 C Occupation Vice President & General Manager Aggregate Year-to-Date 245.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Gordon N. Litwin Mailing Address 63 Borden Place City Little Silver FEC ID number of contributing federal political committee.	State Zip Code NJ 07739-1726	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Meridian Health Receipt For: Primary General Other (specify) ▼	Occupation Vice Chairman Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Adam C. Beder Mailing Address 111 McGutty Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Somerset FEC ID number of contributing federal political committee.	State Zip Code NJ 08873	Transaction ID: 14868041 Amount of Each Receipt this Period 125.00
Name of Employer Solaris Health System Receipt For: Primary General Other (specify) ▼	Occupation Director, Government Affairs Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	395.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr John A DiAngelo Mailing Address 105 Pancoast Place City Mullica Hill FEC ID number of contributing federal political committee. Name of Employer South Jersey Healthcare Receipt For: Primary General Other (specify)	State Zip Code NJ 08062-4735 C Occupation Senior Vice President Finance and Ch Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 14868042 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Fred Hipp, Jr. Mailing Address 1011 Deacon Road City Hainesport FEC ID number of contributing federal political committee. Name of Employer Virtua Health Receipt For: Primary General Other (specify)	State Zip Code NJ 08036-3610 C Occupation Vice President Aggregate Year-to-Date 500.00	Date of Receipt 12 14 2007 Transaction ID: 14868046 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Richard P Miller Mailing Address 37 Milford Drive City MarIton FEC ID number of contributing federal political committee. Name of Employer Virtua Health Receipt For: Primary General Other (specify)	State Zip Code NJ 08053-5408 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 750.00	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: 14868047 Amount of Each Receipt this Period 750.00
SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••	1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Alexander J. Hatala Mailing Address 1 Lucas Court City Mt. Laurel FEC ID number of contributing federal political committee. Name of Employer Our Lady of Lourdes Medical Center Receipt For: Primary General Other (specify)	State Zip Code NJ 08103-3101 C Occupation President/CEO Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain City New Hope	Road State Zip Code PA 18938-5760	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Sr. VP., Health Economics Aggregate Year-to-Date 349.59	40.42
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane City	State Zip Code	Date of Receipt M
Livingston FEC ID number of contributing federal political committee.	NJ 07039-2750	Amount of Each Receipt this Period 30.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President Continuing Care Servi Aggregate Year-to-Date 235.00	ce
SUBTOTAL of Receipts This Page (optional)		570.42

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Valerie S. Kantrowitz		Date of Receipt
	Mailing Address 82 Millers Grove Road		12 14 2007
	City Belle Mead	State Zip Code NJ 08502-4306	Transaction ID: 14868103
	FEC ID number of contributing federal political committee.	C 06302-4306	Amount of Each Receipt this Period 375.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior V.P., Health Planning & Rese	ear¢
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
. –	Full Name (Last, First, Middle Initial) Mr. Marc Lory Mailing Address 20 Farmingham Road		Date of Receipt
	Mailing Address 20 Farmingham Road		12 14 2007
	City	State Zip Code	Transaction ID: 14868114
	Ocean FEC ID number of contributing federal political committee.	NJ 07712-7920	Amount of Each Receipt this Period 250.00
	Name of Employer Meridian Health	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Thomas L. Bell	I	Date of Receipt
	Mailing Address 4301 NW Valley Road	I	12 31 2007
	City	State Zip Code	Transaction ID: 14868134
	Topeka FEC ID number of contributing federal political committee.	KS 66618-3445	Amount of Each Receipt this Period 57.72
	Name of Employer Kansas Hospital Associati- on	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.04	
	SUBTOTAL of Receipts This Page (optional) .		682.72

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 305 (check only one) X
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Ms. Melissa Levy Hungerford Mailing Address 6448 SW Bayshore Dri City	ive State	Zip Code	Date of Receipt M
	Auburn	KS	66402-9324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		70.52
	Name of Employer Kansas Hospital Association Receipt For: Primary General Other (specify)		n President • Year-to-Date ▼ 249.99]
	Full Name (Last, First, Middle Initial) Mr. Fred J. Lucky Mailing Address 14607 West 89th Stree	et		Date of Receipt 1 2 3 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 14868142
	Lenexa	KS	66215-2967	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.40
	Name of Employer Kansas Hospital Associati- on		ice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Robert T. Meling			Date of Receipt
	Mailing Address 13005 Catalina Street			12 31 YYYY 12 31 2007
	City	State	Zip Code	Transaction ID: 14868143
	Leawood	KS	66209-2392	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.70
	Name of Employer Associated Purchasing Ser- vices		ice President (APS)	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.01	
	SUBTOTAL of Receipts This Page (optional)			243.62

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions
American Hospital Association PAG Full Name (Last, First, Middle Initial)	<i>j</i>	Ī
Mr. Chad R. Austin Mailing Address 6518 SW 26th Cou	rt	Date of Receipt 1 2 2 8 2 0 0 7
City Topeka	State Zip Code KS 66614-4305	Transaction ID: 14868150 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Kansas Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Government Relations Aggregate Year-to-Date 300.00	_
Full Name (Last, First, Middle Initial) Mr. Michael E. Schrader Mailing Address 3120 SW Shadow I	Lane	Date of Receipt
City	State Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14868160
<u>Topeka</u>	KS 66604-2541	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Francis Health Center	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Christopher L Wearmouth, , FACHE		Date of Receipt
Mailing Address PO Box 13727		12 21 2007
City	State Zip Code	Transaction ID: 14868620
Roanoke FEC ID number of contributing federal political committee.	VA 24036-3727	Amount of Each Receipt this Period 250.00
Name of Employer Tazewell Community Hospit- al	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 257.50	
SUBTOTAL of Receipts This Page (optional		800.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Crieck Only Onle)
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Rocklon B. Chapin Mailing Address 502 East Second S	Street	Date of Receipt
City <u>Duluth</u> FEC ID number of contributing	State Zip Code MN 55805-1982	Transaction ID: 14868669 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼ Name of Employer St. Mary's/Duluth Clinic Health System Receipt For: Other (specify) ▼	Occupation Executive Vice President & Sr. C Aggregate Year-to-Date ▼ 1020.0	
Full Name (Last, First, Middle Initial) Mr. Thomas Crowley Mailing Address 1200 Grant Boulev	vard West	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14868671
Wabasha	MN 55981-1098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	105.00
Name of Employer Saint Elizabeth's Medical Center Receipt For: Primary Other (specify) ▼	Occupation President and Chief Executive O Aggregate Year-to-Date 270.0	
Full Name (Last, First, Middle Initial) Mr. James F Hanko		Date of Receipt
Mailing Address 1300 Anne Street I	NW	12 / 28 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14868678
Bemidji FEC ID number of contributing federal political committee.	MN 56601-5103	Amount of Each Receipt this Period 57.50
Name of Employer North Country Regional Ho- spital Receipt For:	Occupation President and Chief Executive O Aggregate Year-to-Date ▼	fficer
Primary General Other (specify) ▼	575.0	0
SUBTOTAL of Receipts This Page (option	al)	662.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Gregg Redfield		Date of Receipt
Mailing Address 2550 University Avenue Suite 350-S		12 28 2007
City <u>Sa</u> int Paul	State Zip Code MN 55114-1052	Transaction ID: 14868682
FEC ID number of contributing federal political committee.	C 35114-1032	Amount of Each Receipt this Period 50.01
Name of Employer Minnesota Hospital Association Receipt For: Primary Other (specify) ▼	Occupation Vice President, Finance Aggregate Year-to-Date ▼ 200.04	
Full Name (Last, First, Middle Initial) Ms. Elizabeth J Martin		Date of Receipt
Mailing Address 618 Hospital Road		12 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14868703
Tappahannock	VA 22560-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Riverside Tappahannock Ho- spital	Occupation Vice President and Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Peter Gallagher		Date of Receipt
Mailing Address 11633 Rutgers Dr.		12 21 2007
City	State Zip Code	Transaction ID: 14868712
Richmond FEC ID number of contributing federal political committee.	VA 23233-1685	Amount of Each Receipt this Period 250.00
Name of Employer Bon Secours-Richmond Comm-	Occupation Spring Vice President	-
unity Hospita Receipt For:	Senior Vice President Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		550.01
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Sammons, Jr. Mailing Address 104 Pebble Beach City Williamsburg FEC ID number of contributing federal political committee. Name of Employer Sentara Williamsburg Regional Medical Receipt For: Primary General Other (specify)	State Zip Code VA 23188-8904 C Occupation Vice President Medical Affairs Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Chris A Lumsden Mailing Address 2204 Wilborn Avenue City South Boston FEC ID number of contributing federal political committee. Name of Employer Halifax Regional Health System Receipt For: Primary General Other (specify)	State Zip Code VA 24592-1645 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Ms. Debra A Flores Mailing Address 3609 Calverton Way City Chesapeake FEC ID number of contributing federal political committee. Name of Employer Sentara CarePlex Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 23321-4455 C Occupation Vice President and Administrator Aggregate Year-to-Date 250.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Ms. Wayne Sawyer Mailing Address 4001 River Park Dr. City Suffolk FEC ID number of contributing federal political committee. Name of Employer Bon Secours Hampton Rd	State Zip Code VA 23435-3356 C Occupation President	Date of Receipt M M
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr Ned Borgstrom Mailing Address 2460 W. 26th Avenue.,	#100	Date of Receipt 1 2 2 8 2 0 0 7
	City	State Zip Code	Transaction ID: 14868804
	Denver	CO 80211-5308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Exempla Healthcare, Inc.	Occupation Senior Vice President Finance and Pl	an
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. William D Jacobsen		Date of Receipt
	Mailing Address 520 Jubal Early highwa	ay	12 21 YYYY 21 2007
	City	State Zip Code	Transaction ID: 14868812
	Wirtz	VA 24184-3818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Carilion Franklin Memorial Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/_</u>	Full Name (Last, First, Middle Initial) Mr. John M. Toups		Date of Receipt
	Mailing Address 1460 Waggaman Circ		12 21 2007
	City	State Zip Code VA 22101-4004	Transaction ID: 14868815
	McLean FEC ID number of contributing federal political committee.	VA 22101-4004	Amount of Each Receipt this Period 250.00
	Name of Employer Inova Health System	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
	Full Name (Last, First, Middle Initial) Mr Thomas S Kluge		Date of Receipt
	Mailing Address 2204 Wilborn Avenue		12 21 2007
	City	State Zip Code	Transaction ID: 14868817
	South Boston	VA 24592-1638	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Halifax Regional Health System	Occupation Chief Operating Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
_	Full Name (Last, First, Middle Initial) Ms. Melina Dee Perdue		Date of Receipt
	Mailing Address 101 Elm Avenue SE		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: 14868818
	Roanoke	VA 24013-2222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Carilion Health System	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
	SUBTOTAL of Receipts This Page (optional)	l	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kevin L Unger, , FACHE Mailing Address 1024 South Lemay A	venue	Date of Receipt
City	State Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14868822
Fort Collins	CO 80524-3998	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Poudre Valley Hospital	Occupation President and Chief Executive Offic	er
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James R. O'Connell		Date of Receipt
Mailing Address 2222 N. Nevada Ave	nue	12 28 2007
City	State Zip Code	Transaction ID: 14868823
Colorado Springs	CO 80907-6819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Penrose-St. Francis Health Services	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Arlen Reynolds		Date of Receipt
Mailing Address 1888 Inverness Drive	e West, #500	12
City	State Zip Code	Transaction ID: 14868829
Englewood	CO 80112	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Centura Health	Occupation Chief Executive Officer Interim	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 305 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	arooo or any ponioca committee to	
Full Name (Last, First, Middle Initial) Ms. Terri L. Allen			Date of Receipt
Mailing Address 1151 East Warren	ville Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14869378
<u>Naperville</u>	IL	60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Illinois Hospital Associa- tion	Occupatio Regional	n Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Elena Butkus			Date of Receipt
Mailing Address 1151 E. Warrenvill	e Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14869380
<u>Naperville</u>	<u> L</u>	60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Illinois Hospital Associa- tion	Occupatio Vice Pres	n sident, Finance	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00]
Full Name (Last, First, Middle Initial) Mr. Mark Deaton			Date of Receipt
Mailing Address 740 North Hayes			12 DD / YYYY 12 07 2007
City Oak Park	State IL	Zip Code 60302-1706	Transaction ID: 14869400
FEC ID number of contributing		00302-1700	Amount of Each Receipt this Period
federal political committee.	C		416.70
Name of Employer Illinois Hospital Associa- tion		General Counsel	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		666.72	
SUBTOTAL of Receipts This Page (options			1241.70

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 305 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville		Date of Receipt 1 2 0 7 2 0 0 7
City	State Zip Code	Transaction ID: 14869419
Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 625.00
Name of Employer Illinois Hospital Associa- tion Receipt For: Primary General Other (specify) ▼	Occupation Director of Development Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Ms. Lois DeTraglia Mailing Address 1151 E. Warrenville R	d.	Date of Receipt 1 2 0 7 2 0 0 7
City	State Zip Code	Transaction ID: 14869420
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.40
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.44	
Full Name (Last, First, Middle Initial) Ms. Barbara Filliung		Date of Receipt
Mailing Address 1013 59th Street		12 07 2007
City <u>Lisle</u>	State Zip Code IL 60532-3122	Transaction ID: 14869421 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.40
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.44	
		1041.80

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Brian Foster Mailing Address 1151 E. Warrenville PO Box 3015	Rd.	Date of Receipt 1 2 0 7 2 0 0 7
City	State Zip Code	Transaction ID: 14869422
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.70
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	
Full Name (Last, First, Middle Initial) Ms. Tamara Lynn Gamrat	_	Date of Receipt
Mailing Address 1911 Hamilton Stree	Ţ	12 04 2007
City	State Zip Code	Transaction ID: 14869436
<u>Murphysboro</u>	IL 62966-1519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	156.30
Name of Employer Illinois Hospital Associa- tion	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.08	
Full Name (Last, First, Middle Initial) Ms. Ann C. Guild		Date of Receipt
Mailing Address 1151 E. Warrenville PO Box 3015		12 04 2007
City Naperville	State Zip Code IL 60563-9339	Transaction ID: 14869438
FEC ID number of contributing federal political committee.	C 00005-9339	Amount of Each Receipt this Period 416.70
Name of Employer Illinois Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	
		989.70

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer Mailing Address 1755 Maple Lane		Date of Receipt 1 2 0 4 2 0 0 7
City Wheaton	State Zip Code IL 60187-3317	Transaction ID: 14869448 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	619.59
Name of Employer Central DuPage Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 978.30	
Full Name (Last, First, Middle Initial) Ms. Teresa Hursey Mailing Address 1151 East Warrenvi	lle Road	Date of Receipt
City	State Zip Code	Transaction ID: 14869449
Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 625.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Susan Kaufman		Date of Receipt
Mailing Address 1151 E. Warranville	Rd.	1 2 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14869451
Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 210.00
Name of Employer Illinois Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	
SUPTOTAL of Possints This Poss (entires) >	1454.59

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael Dudley		Date of Receipt
Mailing Address 4417 Corporation Lan City	e State Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14869455
Virginia Beach	VA 23462-3162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Healthcare	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Cooley		Date of Receipt
Mailing Address 4117 Crossgate Drive		12 21 2007
City	State Zip Code	Transaction ID: 14869481
Fredericksburg FEC ID number of contributing federal political committee.	VA 22408-9538	Amount of Each Receipt this Period 250.00
Name of Employer Medicorp Health System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Cumbie		Date of Receipt
Mailing Address 837 Mackall Drive		12 DD / YYYY 1 2007
City <u>McLean</u>	State Zip Code VA 22101-1615	Transaction ID: 14869484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Inova Health System	Occupation Manager & Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and Sir for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any p name and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Nichole Magalis Mailing Address 1151 East Warrenville	Road	Date of Receipt 1 2 0 4 2 0 0 7
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 14869490
	FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 208.40
	Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Director, Government Relations Aggregate Year-to-Date 333.44	
	Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges Mailing Address 1151 E. Warrenville Ro	ad	Date of Receipt 1 2 0 4 2 0 0 7
	PO Box 3015 City	State Zip Code	Transaction ID: 14869492
	Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 625.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr. William G Ulbricht		Date of Receipt
	Mailing Address P O Box 12588		12 21 2007
	City	State Zip Code FL 33733-2588	Transaction ID: 14869524
	Saint Petersburg FEC ID number of contributing federal political committee.	FL 33733-2588	Amount of Each Receipt this Period 212.50
	Name of Employer St. Anthony's Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 425.00	
\[SUBTOTAL of Receipts This Page (optional)		1045.90

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 169 / 305 (check only one) X
Any information conicd from such Departs and	Detailed Summary Page	13 14 15 16
or for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Kim Streit		Date of Receipt
Mailing Address 1317 Eastin Avenue		1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14869534
Orlando	FL 32804-6309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Associat- ion - Orlando	Occupation VP, Health Research & Information	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Marilyn Stout	1	Date of Receipt
Mailing Address 2776 Cleveland Avenu		12 21 2007
City	State Zip Code	Transaction ID: 14869536
Fort Myers	FL 33901-5855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Lee Memorial Hospital	Occupation Board Member	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Eddie Soler		Date of Receipt
Mailing Address 250 Kentucky blue Cir	rcle	12 21 2007
City	State Zip Code	Transaction ID: 14869542
<u>Apopka</u>	FL 32712-4767	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital	Occupation CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .	1	375.00

or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC ull Name (Last, First, Middle Initial) or. Melinda Estes, , M.D. Itailing Address 111 Colchester Avenue	statements may r name and addro	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A	ull Name (Last, First, Middle Initial) r. Melinda Estes, , M.D.			
A. <u>D</u>	r. Melinda Estes, , M.D.			
_	lailing Address 111 Colchester Avenue			Date of Receipt
		e 		12 / 31 / 2007
	ity Burlington	State VT	Zip Code 05401-1473	Transaction ID: 14869547 Amount of Each Receipt this Period
F	EC ID number of contributing aderal political committee.	C		500.00
N F	lame of Employer letcher Allen Health Care	Occupation President	and Chief Executive Office	r
R	leceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
3. <u>N</u>	ull Name (Last, First, Middle Initial) fr. Robert Simpson failing Address 13270 Corbel Circle 17	710		Date of Receipt
_				12 21 2007
	ity Fort Myers	State FL	Zip Code 33907-6836	Transaction ID: 14869556 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	3330. 3330	250.00
N L	lame of Employer ee Memorial Health System	Occupation President		7
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) Ir Steven Short			Date of Receipt
_	failing Address P O Box 1289			M M / D D / Y Y Y Y Y 1 Y 1 1 2 0 0 7
	ity	State	Zip Code	Transaction ID: 14869558
F	ampa EC ID number of contributing deral political committee.	C	33601-1289	Amount of Each Receipt this Period 250.00
N T	ame of Employer ampa General Hospital	Occupation Executive	Vice President Finance and	d A
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
SUI	BTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 171 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and surfor commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold e name and address of any	d or used by any persor political committee to	n for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Terry Shaw			Date of Receipt
Mailing Address 111 North Orlando Av	enue		12 21 2007
City	State Zip Co		Transaction ID: 14869560
Fort Worth	FL 32789	-3675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Adventist Health System Sunbelt Health	Occupation Chief Financial Off	icer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	te ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Brigitte W. Shaw			Date of Receipt
Mailing Address 1602 Haven Bend			1 2 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Co	de	Transaction ID: 14869561
Tampa	FL 33613	-1138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer University Community Hosp- ital	Occupation VP		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	te ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Lewis Seifert	l		Date of Receipt
Mailing Address 4029 Coolwater Court			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Winter Bark	State Zip Co		Transaction ID: 14869564
Winter Park	FL 32792	-8901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Florida Hospital	Occupation Administrator, Fina		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	250.00	
SUBTOTAL of Receipts This Page (optional) .			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Charles A Schauer, , Ph.D. Mailing Address 3599 University Blv City Jacksonville	rd South State Zip Code FL 32216-4211	Date of Receipt 1 2 2 1 2 0 0 7 Transaction ID: 14869565 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Brooks Rehabilitation Hospital Receipt For: Primary General Other (specify)	Occupation President Aggregate Year-to-Date 250.00	125.00
Full Name (Last, First, Middle Initial) Mr. David Robbins Mailing Address 12909 Rain Forces City Tampa	t Street State Zip Code FL 33617-1385	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 250.00	125.00
Full Name (Last, First, Middle Initial) Ms. Judith Ploszek Mailing Address 2863 Bayshore Tra	ils Drive	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Tampa FEC ID number of contributing federal political committee.	State Zip Code FL 33611-5525	Transaction ID: 14869574 Amount of Each Receipt this Period 125.00
Name of Employer Tampa General Hospital Receipt For: Primary General Other (specify)	Occupation Vice President Finance Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional	J)	375.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 305 (check only one) X 11a
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)		
Ms. Diane S. Raines		Date of Receipt
Mailing Address 4090 San Jose Boule	/ard	12 21 2007
City	State Zip Code	Transaction ID: 14869578
<u>Jacksonville</u>	FL 32207-6063	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Baptist Health	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	7
Full Name (Last, First, Middle Initial) Mr. Dantuluri Raju Mailing Address 3304 SE 17th Court		Date of Receipt
City	State Zip Code	Transaction ID: 14869579
<u>Ocala</u>	FL 34471-6793	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Munroe Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Rich Rasmussen	I	Date of Receipt
Mailing Address 405 El Destinado Driv	e	12 21 YYYY 12 21 2007
City	State Zip Code	Transaction ID: 14869582
Tallahassee	FL 32301-1522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Florida Hospital Associat- ion	Occupation VP for Strategic Communications	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional) .		875.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Richard K. Reiner Mailing Address 2711 Orchard Driv City Apopka	ve State Zip Code FL 32712-3957	Date of Receipt M M M
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00
Name of Employer Adventist Health System Receipt For: Primary General Other (specify) ▼	President Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Kathy A. Reep Mailing Address 19 W. New Hamp	shire	Date of Receipt
City Orlando FEC ID number of contributing	State Zip Code FL 32804-5911 C	Transaction ID: 14869586 Amount of Each Receipt this Period 125.00
Name of Employer Florida Hospital Association - Orlando Receipt For: Primary Other (specify) ▼	Occupation Vice President, Financial Services Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. C. B. Rebsamen, MD Mailing Address 18201 Chesapeak	se Ct.	Date of Receipt
City Fort Myers	State Zip Code FL 33908-4676	Transaction ID: 14869588 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Lee Memorial Hospital	Occupation Chief Medical Director	125.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III		Date of Receipt
Mailing Address 4109 Southwoods F	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14869626
Springfield	IL 62707-6070	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Illinois Hospital Associa- tion	Occupation Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. John J. Raleigh		Date of Receipt
Mailing Address 1141 East Warrenvi	lle Road	12 04 7 2007
City	State Zip Code	Transaction ID: 14869628
<u>Naperville</u>	IL 60563-1493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1150.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth C. Robbins		Date of Receipt
Mailing Address 1531 Maria Court		12 04 YYYY 12007
City	State Zip Code	Transaction ID: 14869631
Wheaton	IL 60187-3777	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Illinois Hospital Associa- tion	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
)	2000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 305 (check only one) X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>Γ</u> <u>Μ</u>	ull Name (Last, First, Middle Initial) s. Jo Ann Spoor ailing Address 700 South Second Stre	eet eet		Date of Receipt
Ci	ity	State IL	Zip Code	1 2 0 4 2 0 0 7 Transaction ID: 14869633
FE	pringfield EC ID number of contributing deral political committee.	C	62704-2516	Amount of Each Receipt this Period 250.00
<u>tic</u>	ame of Employer inois Hospital Associa- on eceipt For: Primary General Other (specify)	Occupation Manager, Aggregate]
M	ull Name (Last, First, Middle Initial) s. Lori Williams ailing Address 1151 East Warrenville	Road		Date of Receipt 1 2 0 4 2 0 0 7
Ci	ity	State	Zip Code	Transaction ID: 14869641
<u>N</u>	aperville	IL	60563-9339	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		500.00
III <u>tic</u>		Occupation Chief Exe	n ecutive Officer	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00]
	ull Name (Last, First, Middle Initial) s. Gwen S Eddleman, , FACHE, E			Date of Receipt
М	ailing Address 1690 Dood St.			1 2 2 1 2 0 0 7
Ci	ity	State	Zip Code	Transaction ID: 14869742
<u>F</u>	armville	VA	23901-2783	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
So ta		. '	and Chief Executive Office	r
Re [eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUB	STOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Phyllis Stoneburner		Date of Receipt
Mailing Address 4544 Miarfield Circle	State Zip Code	1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chesapeake	VA 23321-4262	Transaction ID: 14869743 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25021 4202	250.00
Name of Employer Sentara Obici Hospital	Occupation Vice President, Patient Care Services	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Rob Lockridge	<u>I</u>	Date of Receipt
Mailing Address 14304 Horseshoe Ford	d Rd	12 21 7 2007
City	State Zip Code	Transaction ID: 14869748
Ashland	VA 23005-3163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Virginia Me- dical Center	Occupation Lobbyist/Government Relations Office	er .
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jeff Burke	<u> </u>	Date of Receipt
Mailing Address 12600 Foxstone Court		12 21 2007
City	State Zip Code	Transaction ID: 14869751
Midlothian	VA 23113-2279	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation Chief Information Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	750.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 305 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert Guanci Mailing Address 1216 Master Row City Chesapeake FEC ID number of contributing federal political committee. Name of Employer Maryview Medical Center Receipt For:	State Zip Code VA 23320-9454 C Occupation Vice President Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 2 1 2 0 0 7 Transaction ID: 14869753 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	250.00	
Mr. Lee Adler Mailing Address 145 N. Spring Trail City Altamonte Springs FEC ID number of contributing federal political committee. Name of Employer Florida Hospital-Altamonte Receipt For: Primary General Other (specify)	State Zip Code FL 32714-3462 C Occupation Hospital Administrator Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Robin DeLaVergne Mailing Address 37 Aegean Avenue City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33606-3309 C Occupation Vice President, Development Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 14869811 Amount of Each Receipt this Period 125.00
SUBTOTAL of Receipts This Page (optional	J)	500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 305 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Janet Davis Mailing Address 3611 Casablanca Ave		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14869812
St Pete Beach FEC ID number of contributing federal political committee.	FL 33706-3903	Amount of Each Receipt this Period 125.00
Name of Employer Tampa General Hospital Receipt For: Primary Other (specify) ▼	Occupation VP, Acute Care & Theraphy Service Aggregate Year-to-Date ▼ 250.00	es
Full Name (Last, First, Middle Initial) Mr. Craig R Cudworth Mailing Address 524 West Sagamore A	Avenue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14869814
Clewiston	FL 33440-3514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	197.50
Name of Employer Hendry Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 395.00	
Full Name (Last, First, Middle Initial) Mr. Paul Belcher		Date of Receipt
Mailing Address Rt. 15, Box 241		12 21 2007
City	State Zip Code FL 32311	Transaction ID: 14869826
<u>Tallahassee</u>	FL 32311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		822.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William A. Bell Mailing Address 944 Gentian Court City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	State Zip Code FL 32312-1228 C Occupation General Counsel Aggregate Year-to-Date 1000.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Michael D. Aubin Mailing Address 6445 Renwick Circle City Tampa FEC ID number of contributing federal political committee. Name of Employer BayCare Health System	State Zip Code FL 33647-1176 C Occupation Chief Operating Officer	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Douglas Baer Mailing Address 3599 University Blvd S	Aggregate Year-to-Date ▼ 250.00 South	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Jacksonville FEC ID number of contributing federal political committee.	State Zip Code FL 32216-4252	Transaction ID: 14869831 Amount of Each Receipt this Period 125.00
Name of Employer Brooks Rehabilitation Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jeffrey Seraphine		Date of Receipt
Mailing Address 1140 Lexington Road		12 28 2007
City Georgetown	State Zip Code KY 40324-9330	Transaction ID: 14869908 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Lake Cumberland Regional Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 1100.00	
Full Name (Last, First, Middle Initial) Mr. Murray B Clark, , Jr. Mailing Address 800 Rose Street, N10	0	Date of Receipt
City	State Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14869912
<u>Lexington</u>	KY 40536-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer University of Kentucky Ho- spital	Occupation Associate Vice President Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Mr. Bruce D Begley		Date of Receipt
Mailing Address P O Box 48		12 28 2007
City	State Zip Code	Transaction ID: 14869916
Henderson FEC ID number of contributing federal political committee.	KY 42420-0048	Amount of Each Receipt this Period 600.00
Name of Employer Methodist Hospital	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
	l	1550.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 305 (check only one) X
Any information copied from or for commercial purposes NAME OF COMMITTEE American Hospital A	other than using the name and a	nay not be sold or used by any persuaddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, MMs. Doris Thomas Mailing Address 800 I City Bowling Green FEC ID number of contrifederal political committee Name of Employer Commonwealth Regional cialty Hospit Receipt For: Primary Other (specify)	Park Street State KY buting e. C Occupat Vice Pr	Zip Code 42101-2356 tion resident of Marketing ate Year-to-Date ▼ 275.00	Date of Receipt M M 28 2007 Transaction ID: 14869920 Amount of Each Receipt this Period 150.00
Full Name (Last, First, MMr. John R. Brownlow Mailing Address 5608 City Apopka FEC ID number of contrifederal political committee Name of Employer Florida Hospital Receipt For: Primary Other (specify)	Bear Lake Circle State FL buting e. Occupat Vice Pr	Zip Code 32703-1916 tion resident and Chief Operating Cate Year-to-Date 250.00	Date of Receipt M M 2 1 2 0 0 7 Transaction ID: 14869924 Amount of Each Receipt this Period 125.00
City Saint Petersburg FEC ID number of contri federal political committe Name of Employer Bayfront Medical Center Receipt For:	Sixth Street South State FL buting e. Occupat Preside	Zip Code 33701-4891 tion ent and Chief Executive Office ate Year-to-Date ▼ 1000.00	Date of Receipt M
SUBTOTAL of Receipts T	his Page (optional)		775.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. E. Berton Whitaker Mailing Address 900 Clinic Drive City Madisonville FEC ID number of contributing federal political committee. Name of Employer Regional Medical Center of Hopkins Cou Receipt For: Primary General Other (specify)	State Zip Code KY 42431-1653 C Occupation President & CEO Aggregate Year-to-Date 600.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Dr. Randel Flowers, , Ph.D. Mailing Address 723 Burkesville Road City Albany FEC ID number of contributing federal political committee. Name of Employer Clinton County Hospital Receipt For: Primary General Other (specify)	State Zip Code KY 42602-1654 C Occupation Administrator Aggregate Year-to-Date 275.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Susan Meyers Mailing Address 3600 West Cumberlar City Middlesboro FEC ID number of contributing federal political committee. Name of Employer Middlesboro Appalachian Regional Hospi Receipt For: Primary General Other (specify)	State Zip Code KY 40965-2614 C Occupation Administrator Assistant Aggregate Year-to-Date 275.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 8 2 0 0 7 Transaction ID: 14869931 Amount of Each Receipt this Period 150.00
SUBTOTAL of Receipts This Page (optional)		900.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 305 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	rts and Statements may not be sold or used by any persousing the name and address of any political committee to PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Brian Brezosky Mailing Address Post Office Bo		Date of Receipt 1 2 2 8 2 0 0 7
City Louisville	State Zip Code KY 40253-6620	Transaction ID: 14869937 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 40233-0020	600.00
Name of Employer Kentucky Hospital Associa- tion Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 1100.00]
Full Name (Last, First, Middle Initial) Ms. Elizabeth G. Cobb Mailing Address P.O. Box 4366	29	Date of Receipt 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14869938
Louisville	KY 40205-3033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Director of Health Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00]
Full Name (Last, First, Middle Initial) Ms. Paige Franklin		Date of Receipt
Mailing Address 404 Kaelin Dri	/e	12 28 2007
City	State Zip Code	Transaction ID: 14869940
Louisville FEC ID number of contributing federal political committee.	KY 40207-2204	Amount of Each Receipt this Period 600.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Vice President, Information Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (o	otional)	1450.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e Concectionly only
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by ar name and address of any political comn	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	American Hospital Association PAC		
١.	Full Name (Last, First, Middle Initial) Ms. Nancy C. Galvagni Mailing Address 7505 Pine Knoll Circle		Date of Receipt
		State Zip Code	12 28 2007
	City Prospect	State Zip Code KY 40059-9208	Transaction ID: 14869941 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.	
 s.	Full Name (Last, First, Middle Initial) Ms. Joy Knight		Date of Receipt
	Mailing Address 8213 Chapel Drive		12 28 2007
	City	State Zip Code KY 40014-8102	Transaction ID: 14869949
	Crestwood FEC ID number of contributing federal political committee.	KY 40014-8102	Amount of Each Receipt this Period 150.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 650.	00
_	Full Name (Last, First, Middle Initial) Mr. Stephen P. Miller		Date of Receipt
	Mailing Address 1101 Cardinal Drive		12 28 2007
	City	State Zip Code KY 40253-6629	Transaction ID: 14869950
	Louisville FEC ID number of contributing federal political committee.	KY 40253-6629	Amount of Each Receipt this Period 600.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.	00
	UBTOTAL of Receipts This Page (optional)		1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sarah S. Nicholson Mailing Address 1100 Glenbrook Road City Louisville FEC ID number of contributing federal political committee. Name of Employer Kentucky Hospital Association Receipt For: Primary General Other (specify)	State Zip Code KY 40223-2214 C Occupation Vice President, Government Relations Aggregate Year-to-Date ▼ 730.76	Date of Receipt M M 28 2007 Transaction ID: 14869952 Amount of Each Receipt this Period 230.76
Full Name (Last, First, Middle Initial) Mrs. Darlene Phillips Mailing Address 4623 Saratoga Hill Ro City Louisville FEC ID number of contributing federal political committee.	ad State Zip Code KY 40299-4381	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Kentucky Hospital Associa- tion Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 275.00	
Full Name (Last, First, Middle Initial) Ms. Debbie Riley Mailing Address 26W171 Roosevelt Ro	pad	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wheaton FEC ID number of contributing federal political committee.	State Zip Code IL 60187-6061 C	Transaction ID: 14869967 Amount of Each Receipt this Period 600.00
Name of Employer Wheaton Franciscan Health- care Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 600.00	
SUBTOTAL of Receipts This Page (optional)	>	980.76

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 305 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carol J. Walters Mailing Address Post Office Box 43662 City Louisville FEC ID number of contributing federal political committee.	State Zip Code KY 40253-6629 C	Date of Receipt M M M
Name of Employer Kentucky Hospital Associa- tion Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Vice President Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Ms. Paula R Autry Mailing Address 12028 Amberwood La	ne	Date of Receipt 1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14869978
Glen Allen	VA 23059-7536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours-Richmond Community Hospita Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr John Stone		Date of Receipt
Mailing Address 1857 Ames Circle		1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14869982
Chesapeake	VA 23321	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bon Secours Hampton Rd	Occupation Vice President Advocacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Pat Donnelly Mailing Address 2858 Gloria Ct.			Date of Receipt
City Clearwater	State FL	Zip Code 33761-3825	Transaction ID: 14870022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	007010020	125.00
Name of Employer BayCare Health System Receipt For:	Occupatio Administ		
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Mr. Michael K Kerner Mailing Address 9025 Norwick Rd			Date of Receipt 1 2 2 1 2 0 0 7
City	State	Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14870297
Richmond	VA	23229-7760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Bon Secours St. Mary's Ho- spital		e Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. James B Cole			Date of Receipt
Mailing Address 39651 Clifton mano	r PL		12 21 2007
City	State	Zip Code	Transaction ID: 14870304
<u>Haymarket</u>	VA	20169	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Virginia Hospital Center - Arlington Receipt For:		n ecutive Officer e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	250.00	
SUBTOTAL of Receipts This Page (optional)		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Randall L. Haffner Mailing Address 900 Cranes Street		Date of Receipt
City	State Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14870344
Maitland	FL 32751-6900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Charles Gibson		Date of Receipt
Mailing Address 3485 Stately Oaks Lan	ne	12 21 2007
City	State Zip Code	Transaction ID: 14870349
<u>Duluth</u>	GA 30097-5155	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Marshall Erdman & Associa- tes	Occupation Director of Business Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Ronald M Gilliard, , FACHE		Date of Receipt
Mailing Address P O Box 419		12 21 2007
City	State Zip Code	Transaction ID: 14870350
Blountstown	FL 32424-0419	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Calhoun-Liberty Hospital	Occupation Chief Executive Officer and Administra	a a
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	375.00
TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 305 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Ms. Cheryl Eagan Mailing Address 75 Bahama Circle City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General	State Zip Code FL 33606-3339 C Occupation Vice President, Support Svcs. Aggregate Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr George Fayer Mailing Address P O Box 565002, Mail City Rockledge FEC ID number of contributing	Stop 1 State Zip Code FL 32956-5002	Date of Receipt 1 2 2 1 2 0 0 7 Transaction ID: 14870358 Amount of Each Receipt this Period
	Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General Other (specify)	Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	125.00
 }.	Full Name (Last, First, Middle Initial) Mr. Aurelio Fernandez Mailing Address 1901 SW 172nd Avenuation City Miramar FEC ID number of contributing	State Zip Code FL 33029-5592 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify)	Occupation Administrator Aggregate Year-to-Date 250.00]
[SUBTOTAL of Receipts This Page (optional)		375.00

Date of Receipt Date of Receipt Transaction ID: 14870361 Amount of Each Receipt this Period Date of Receipt Date of Receipt 1 2 1 2 2 0 0 7 Transaction ID: 14870361 Amount of Each Receipt this Period 250.00 Transaction ID: 14870362 Amount of Each Receipt this Period 200.00
Transaction ID: 14870361 Amount of Each Receipt this Period Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID: 14870361 Amount of Each Receipt this Period Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1 2 2 1 2 0 0 7 Transaction ID: 14870361 Amount of Each Receipt this Period 250.00 Date of Receipt
Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Transaction ID: 14870362 Amount of Each Receipt this Period
Transaction ID: 14870362 Amount of Each Receipt this Period
Transaction ID: 14870362 Amount of Each Receipt this Period
Transaction ID: 14870362 Amount of Each Receipt this Period
Amount of Each Receipt this Period
Date of Receipt
12 21 2007
Transaction ID: 14870363
Amount of Each Receipt this Period 125.00
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SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Benorts an	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 192 / 305 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Timothy J Goldfarb		Date of Receipt
Mailing Address 1600 SW Archer Ro	oad .	12 21 2007
City	State Zip Code	Transaction ID: 14870365
Gainesville	FL 32610-3003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer Shands HealthCare	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
Full Name (Last, First, Middle Initial) Mr. Jeffery Hurst		Date of Receipt
Mailing Address 533 Northridge Driv	е	1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14870367
Altamonte Springs	FL 32714-1831	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital-Altamonte	Occupation Vice President	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Jean M. Brereton		Date of Receipt
Mailing Address 106 Cahill Drive		12 21 YYYY 12007
City	State Zip Code	Transaction ID: 14870418
Alexandria	VA 22304-6445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Inova Health System	Occupation Executive Director	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Mark Bower Mailing Address 1000 Shenandoah Ave City Front Royal FEC ID number of contributing federal political committee. Name of Employer Warren Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 22630-3598 C Occupation Vice President Aggregate Year-to-Date 500.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Karen Late, MHS Mailing Address 444 North Capitol Stresuite 532 City Washington FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	State Zip Code DC 20001-1512 C Occupation Director, Federal Advocacy Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Chantal Leconte Mailing Address P O Box 565002, Mail City Rockledge FEC ID number of contributing federal political committee. Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General Other (specify)	Stop 1 State Zip Code FL 32956-5002 C Occupation Administrator Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / 21 / 2007 Transaction ID: 14870440 Amount of Each Receipt this Period 125.00
SUBTOTAL of Receipts This Page (optional)		1125.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 305 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any perso using the name and address of any political committee to a PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial Mr. Doug Luckett Mailing Address 12877 Pasture City Fort Myers FEC ID number of contributing federal political committee. Name of Employer Lee Memorial Health System Receipt For: Primary General		Date of Receipt M M M / D D / Y Y Y Y Y 1 2 1 2 0 0 7 Transaction ID: 14870443 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial Mr. Marvin Kurtz Mailing Address 4967 Anniston City Tampa FEC ID number of contributing federal political committee.	0 0 0 0 0 0 0 0	Date of Receipt M M M
Name of Employer University Community Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial Mr. John Hillenmeyer Mailing Address 1414 Kuhl Ave City Orlando FEC ID number of contributing federal political committee.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Orlando Regional Healthca- re Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (c	otional)	875.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	η not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lars Houmann Mailing Address 601 East Rollins St	reet		Date of Receipt
City Orlando	State FL	Zip Code 32803-1248	Transaction ID: 14870446 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Florida Hospital	Occupation Presiden		545.00
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1090.00	
Full Name (Last, First, Middle Initial) Mr. Ronald A Hytoff Mailing Address P O Box 1289			Date of Receipt 1 2 2 1 2 0 0 7
City	State	Zip Code	Transaction ID: 14870447
Tampa	FL	33601-1289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Tampa General Hospital		t and Chief Executive Officer	,
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Richard M Irwin, , Jr.	•		Date of Receipt
Mailing Address 10000 West Colonia	al Drive		12 21 2007
City	State	Zip Code	Transaction ID: 14870448
Ocoee FEC ID number of contributing	<u>FL</u>	34761-3499	Amount of Each Receipt this Period
federal political committee.	C		250.00
Name of Employer Health Central		t and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)		1295.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 196 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold name and address of any	d or used by any persor political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Ms. Sally Jackson Mailing Address 2513 SE 24th Place City	State Zip Co	de	Date of Receipt M
	Cape Coral FEC ID number of contributing federal political committee.	FL 33904		Amount of Each Receipt this Period 125.00
	Name of Employer Lee Memorial Health System Receipt For: Primary General Other (specify) ▼	Occupation System Director of Aggregate Year-to-Da	Community Projecte ▼ 250.00	ts
- 3.	Full Name (Last, First, Middle Initial) Dr. Donald L Jernigan, , Ph.D. Mailing Address 111 North Orlando Ave	nue		Date of Receipt
	City	State Zip Co	de	Transaction ID: 14870450
	Winter Park	FL 32789	-3675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Adventist Health System Sunbelt Health Receipt For: Primary General Other (specify) ▼	Occupation President and Chie Aggregate Year-to-Da		
_	Full Name (Last, First, Middle Initial)			Date of Receipt
•	Mr Warren E Jones Mailing Address 1300 Miccosukee Road			M M / D D / Y Y Y Y Y Y 1 2 2 1 2 0 0 7
	City	State Zip Co		Transaction ID: 14870451
	Tallahassee FEC ID number of contributing federal political committee.	FL 32308	-5054	Amount of Each Receipt this Period 250.00
	Name of Employer Tallahassee Memorial Heal- thCare	Occupation Vice President and	Chief Communicat	 tion
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	te ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional))	875.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 197 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be he name and address of	e sold or used by any person of any political committee to	13 14 15 16 0 16 on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. George Mikitarian, , Jr.			Date of Receipt
Mailing Address 951 North Washingt	on Avenue		12 21 2007
City	State Z	ip Code	Transaction ID: 14870523
<u>Titusville</u>	FL 3	2796-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Parrish Medical Center	Occupation Chief Executiv	e Officer	7
Receipt For:	Aggregate Year-		7
Primary General Other (specify) ▼	35. 53.10 1 541	250.00]
Full Name (Last, First, Middle Initial) Mr. Timothy P Menton	1		Date of Receipt
Mailing Address 2291 SW 76th Lane			1 2 2 1 2 0 0 7
City	State Z	ip Code	Transaction ID: 14870526
<u>Ocala</u>	FL 3	4476-6774	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		272.50
Name of Employer Villages Regional Hospita- I, The	Occupation Chief Executiv	e Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 545.00]
Full Name (Last, First, Middle Initial) Mr. Rulon F Stacey			Date of Receipt
Mailing Address 1809 East Harmony	Road		12 28 2007
City	State Z	ip Code	Transaction ID: 14870557
Fort Collins	CO 8	0528-3446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Poudre Valley Health Syst- em	Occupation President and	Chief Executive Office	,
Receipt For:	Aggregate Year-	to-Date V	
Primary General Other (specify) ▼		250.00	
	1		647.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate for each cate Detailed Sun		FOR LINE NUMBER: PAGE 198 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or uname and address of any polition	used by any persor tical committee to s	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Steven J. Summer			Date of Receipt
Mailing Address 7335 East Orchard Roa Suite 100	d		1 2 2 8 2 0 0 7
City	State Zip Code		Transaction ID: 14870559
Greenwood Village	CO 80111-258	32	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Colorado Hospital Associa-	Occupation		
tion	President & Chief Exec	cutive Officer	
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Mr. Scott Anderson			Date of Receipt
Mailing Address 7335 East Orchard Roa Suite 100	ıd		12 28 2007
City	State Zip Code		Transaction ID: 14870562
Greenwood Village	CO 80111-258	32	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Colorado Hospital Associa- tion	Occupation Vice President of Profe	essional Activit	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	250.00	
Full Name (Last, First, Middle Initial) Ms. Janet Stephens			Date of Receipt
Mailing Address 6014 Watson Drive			1 2 2 8 2 0 0 7
City	State Zip Code		Transaction ID: 14870564
Fort Collins	CO 80528-887	7	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Colorado Hospital Associa- tion	Occupation Vice President of Gove	ernment Affairs	
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)		·····	875.00

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Richard Haugh			Date of Receipt
Mailing Address 7335 East Orchard Roa	ad		12 28 2007
City Greenwood Village	State CO	Zip Code 80111-2582	Transaction ID: 14870568 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00111 2002	125.00
Name of Employer Colorado Hospital Associa- tion	Occupation Director	n of Communications	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Marty Arizumi			Date of Receipt
Mailing Address 7335 East Orchard Roa #100	ad		12 28 7 2007
City Englewood	State CO	Zip Code 80111-2582	Transaction ID: 14870570
FEC ID number of contributing federal political committee.	C	00111-2502	Amount of Each Receipt this Period 250.00
Name of Employer Colorado Hospital Associa- tion Receipt For: Primary General Other (specify) ▼		n sident of Policy Analysis Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Ms. Sandy Merrill			Date of Receipt
Mailing Address 2776 E. Irish Place			12 28 2007
City Centennial	State CO	Zip Code 80122-3321	Transaction ID: 14870841 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		227.00
Name of Employer Colorado Hospital Associa- tion	Occupation Director	n of Education	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 227.00	
SUBTOTAL of Receipts This Page (optional)			602.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ar	ny information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	ratements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ .	Full Name (Last, First, Middle Initial) Mr. Robert Culpepper Mailing Address 1215 Fairway Dr. City Chesapeake FEC ID number of contributing federal political committee. Name of Employer Chesapeake General Hospit-	State Zip Code VA 23320-9401 C Occupation	Date of Receipt M M M
_	al Receipt For: Primary General Other (specify) ▼	Trustee Aggregate Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Charles E Cavagnaro, III, M.D. Mailing Address 40 Wright Street		Date of Receipt 1 2 3 1 2 0 0 7
	City	State Zip Code	Transaction ID: 14871032
	Palmer FEC ID number of contributing federal political committee.	MA 01069-1138	Amount of Each Receipt this Period 250.00
	Name of Employer Wing Memorial Hospital and Medical Cen Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	
— :.	Full Name (Last, First, Middle Initial) Ms. Shirley Holland Mailing Address 161 Lila Lane		Date of Receipt
			12 21 2007
	City Boones Mill	State Zip Code VA 24065-3749	Transaction ID: 14871302 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 24000 0740	250.00
	Name of Employer Carilion Health System	Occupation Vice President	7
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 305 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Kay Hix Mailing Address 2784 Lakeview Rd. City Troutville FEC ID number of contributing federal political committee. Name of Employer Carilion Health System Receipt For: Primary General Other (specify)	State Zip Code VA 24175-2750 C Occupation Executive Director Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Dr J Thomas Ryan, , M.D. Mailing Address 7 Steeplechase rd City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify)	State Zip Code VA 22405-3313 C Occupation Vice President/ Cheif Medical Officer Aggregate Year-to-Date 250.00	Date of Receipt M M 2 1
Full Name (Last, First, Middle Initial) Mr. G. Robert Vaughan, Jr. Mailing Address 1839 Mt. Vernon Road City Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Health System Receipt For: Primary General Other (specify)	State Zip Code VA 24015-2906 C Occupation VP Finance Aggregate Year-to-Date 250.00	Date of Receipt M M / 21 / 2007 Transaction ID: 14871311 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 305 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any person the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Dr. Gary L Gottlieb, , M.D. Mailing Address 75 Francis Street City	State Zip Code	Date of Receipt 1 2 3 1 2 0 0 7 Transaction ID: 14871318
Boston FEC ID number of contributing federal political committee.	MA 02115-6106	Amount of Each Receipt this Period 1000.00
Name of Employer Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 1250.00	
Full Name (Last, First, Middle Initial) Mr. Michael Taylor Mailing Address 533 Kings Grant Re	pad	Date of Receipt 1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14871323
Virginia Beach	VA 23452-7051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Healthcare	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Susan MacLeod		Date of Receipt
Mailing Address 700 Surfside Ave		1 2 2 1 2 0 0 7
City	State Zip Code VA 23451-3677	Transaction ID: 14871325
Virginia Beach FEC ID number of contributing federal political committee.	VA 23451-3677	Amount of Each Receipt this Period 250.00
Name of Employer Maryview Medical Center	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Possints This Poss (antions		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia L. Robertson Mailing Address 205 Oxford Circle Wes City Richmond FEC ID number of contributing federal political committee. Name of Employer Bon Secours St. Mary's Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 23221-3250 C Occupation Executive Vice President & Administration Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Kathryn Wall Mailing Address 11513 Kingswood Blve City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify)	d. State Zip Code VA 22408-1882 C Occupation Executive Vice President Aggregate Year-to-Date ▼	Date of Receipt M M M / 21 / 2007 Transaction ID: 14871337 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Floyd Heater Mailing Address 759 South Main Street City Woodstock FEC ID number of contributing federal political committee. Name of Employer Shenandoah Memorial Hospital Receipt For: Primary General	State Zip Code VA 22664-1127 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M / 21
Other (specify) SUBTOTAL of Receipts This Page (optional)	250.00	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert L Graves		Date of Receipt
Mailing Address 100 Sentara Circle City	State Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14871343
Williamsburg	VA 23188-5713	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sentara Williamsburg Regional Medical Receipt For: Primary General	Occupation Vice President and Administrator Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial)	250.00	
Mr. William H. Powell Mailing Address 2740 Chesterton Road		Date of Receipt 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14871345
Shaker Heights	OH 44122-1805	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Summa Health System	Occupation Vice President General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Fred C Rothstein, , M.D.		Date of Receipt
Mailing Address 1080 W Hill Drive		12 28 7 2007
City	State Zip Code	Transaction ID: 14871349
Gates Mills	OH 44040-9627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals Case Medical Cent	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard J Frenchie		Date of Receipt
Mailing Address 17315 Curry Ln		12 28 2007
City	State Zip Code	Transaction ID: 14871352
Chagrin Falls	OH 44023-5578	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals Geau-	Occupation	7
ga Regional H	President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Archilles A. Demetriou		Date of Receipt
Mailing Address 1954 Epping Road		12 28 2007
City	State Zip Code	Transaction ID: 14871353
Gates Mills	OH 44040-9680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals Gene- va Medical Ce	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Nancy E. Paton		Date of Receipt
Mailing Address 8133 Black Oak Drive		12 28 YYYY 12 28 2007
City	State Zip Code	Transaction ID: 14871354
<u>Lambertville</u>	MI 48144-9324	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Chief, Marketing and Communications	s
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	1250.00

Cleveland FEC ID number of contributing federal political committee. Name of Employer University Hospitals Receipt For: Primary General Other (specify) ▼ City State Zip Code Frederal political committee. Name of Employer University Hospitals Full Name (Last, First, Middle Initial) B. Mr Les Abernathy Mailing Address 1001 Sam Perry Boulevard City State Zip Code Transaction ID: 148 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Occupation Executive Vice President and Chief Fin Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Transaction ID: 148 Date of Receipt Transaction ID: 148	PAGE 206/305 11c	(check only one) X 11a 11b 11c 11	Use separate schedule(s) for each category of the Detailed Summary Page	()	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS
A. Full Name (Last, First, Middle Initial) Mr Kewin V Robens Mailing Address 11100 Euclid Avenue City Cleveland OH 44106-1716 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Les Abernathy Mailing Address 1001 Sam Perry Boulevard City Fredericksburg VA State Zip Code OH Aggregate Year-to-Date Full Name (Last, First, Middle Initial) Mr Les Abernathy Mailing Address FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ State C Full Name (Last, First, Middle Initial) Amount of Each Receipt Transaction ID: 146 Amount of Each Receipt Transaction ID: 148 Transac	ting contributions such committee.	n for the purpose of soliciting contribution solicit contributions from such committee	not be sold or used by any persor dress of any political committee to	nd Statements may the name and add	or for commercial purposes, other than using the
A. Mr Kevin V Roberts Mailing Address 11100 Euclid Avenue City Cleveland City Cleveland City Cleveland City Cleveland City Cleveland City Name of Employer Other (specify) ▼ City FEC ID number of contributing federal political committee. Primary Mailing Address 1001 Sam Perry Boulevard City Fec ID number of contributing federal political committee. FEC ID number of contributing federal political committee. Primary Mailing Address 1001 Sam Perry Boulevard City FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Mailing Address 11 Steeplechase Road City Fec ID number of contributing federal political committee. City Firnal Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City FEC ID number of contributing federal political committee. City Fec ID number of contributing federal political committee. City Fec ID number of contributing federal political committee. City FEC ID number of contributing federal political committee. City Fec ID number of contributing federal political committee. Name of Employer Mailing Address 11 Steeplechase Road City Fec ID number of contributing federal political committee. Name of Employer Medicorp Health System City Fec ID number of contributing federal political committee. Name of Employer Medicorp Health System Aggregate Year-to-Date Transaction ID: 146 Amount of Each Rec Pirmary Coccupation Vice President of Finance Aggregate Year-to-Date Aggregate Year-to-Date Pirmary General Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date Pirmary General Aggregate Year-to-Date Ag				C	American Hospital Association PAC
City Cleveland OH 44106-1716 FEC ID number of contributing federal political committee. Name of Employer University Hospitals Feceipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Les Abernathy Malling Address 1001 Sam Perry Boulevard City State Zip Code FeC ID number of contributing federal political committee. C State Zip Code Fredericksburg VA 22401-3354 FEC ID number of contributing federal political committee. C C Cocupation Executive Vice President and Chief Fin Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Federicksburg VA 22405-3312 FEC ID number of contributing federal political committee. C C Primary General C C Cocupation Vice President of Finance Receipt For: Primary General Occupation Vice President of Finance Receipt For: Primary General Occupation Vice President of Finance Receipt For: Primary General Occupation Vice President of Finance Receipt For: Primary General Occupation Vice President of Finance Receipt For: Primary General		╡			Mr Kevin V Roberts
Cleveland Cleveland Cleveland Cleveland Cleveland FEC ID number of contributing federal political committee. Name of Employer University Hospitals Sr. Vice President & CFO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 148 Amount of Each Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Occupation State Zip Code Transaction ID: 146 Amount of Each Receipt For: Primary General Occupation Vice President of Finance Receipt For: Primary General Occupation Vice President of Finance Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Occupation Vice President of Finance Aggregate Year-to-Date ▼ Primary General Occupation Vice President of Finance Aggregate Year-to-Date ▼	2007	12 28 20	7: 0 1		
FEC ID number of contributing federal political committee. Name of Employer University Hospitals Receipt For: Primary General Other (specify) ▼ State Zip Code FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Occupation Sr. Vice President & CFO Aggregate Year-to-Date ▼ 500.00 Date of Receipt Transaction ID: 148 Amount of Each Receipt For: Primary General Other (specify) ▼ 250.00 Date of Receipt Transaction ID: 148 Amount of Each Receipt For: Primary General Other (specify) ▼ 250.00 Date of Receipt Transaction ID: 148 Amount of Each Receipt For: Primary General Other (specify) ▼ 250.00 Date of Receipt Date of Receipt Transaction ID: 148 Amount of Each Receipt For: Primary General Occupation Sr. Vice President and Chief Fin Aggregate Year-to-Date ▼ 250.00 Date of Receipt Transaction ID: 148 Amount of Each Receipt For: Primary General Occupation VA 22405-3312 Amount of Each Receipt For: Primary General Occupation Vice President of Finance Aggregate Year-to-Date ▼ 260.00		Transaction ID: 14871355 Amount of Each Receipt this Period	·		-
Receipt For:	250.00			C	FEC ID number of contributing
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Les Abernathy Mailing Address 1001 Sam Perry Boulevard City State Zip Code Fredericksburg VA 22401-3354 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Transaction ID: 148 Fredericksburg VA 22405-3312 Date of Receipt Transaction ID: 148 Fredericksburg VA 22405-3312 Amount of Each Rec FEC ID number of contributing federal political committee. Name of Employer Primary General Occupation State Zip Code Transaction ID: 148 Fredericksburg VA 22405-3312 Amount of Each Rec FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Occupation Vice President of Finance Receipt For: Primary General				i '	Name of Employer University Hospitals
Mailing Address 1001 Sam Perry Boulevard City State Zip Code VA 22401-3354 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Executive Vice President and Chief Fin Aggregate Year-to-Date ✓ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System C Name of Employer Medicorp Health System Receipt For: Primary General Occupation Vice President of Finance Aggregate Year-to-Date ▼ Amount of Each Receipt Transaction ID: 148 Amount of Each Receipt Transaction ID: 148 Amount of Each Receipt Aggregate Year-to-Date ▼ Amount of Each Receipt Aggregate Year-to-Date ▼			500.00	Aggregate	Primary General
City State Zip Code Transaction ID: 148 Fredericksburg VA 22401-3354 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System C C Date of Receipt Transaction ID: 148 Amount of Each Rec Date of Receipt Transaction ID: 148 Amount of Each Rec Occupation VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General	/ Y Y Y Y	<u> </u>		oulevard	Mr Les Abernathy
Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Name of Employer Medicorp Health System Receipt For: Regregate Year-to-Date ▼ Amount of Each Receipt Transaction ID: 148 Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt Aggregate Year-to-Date ▼	2007	12 21 20	7'- 0-1-		
FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Transaction ID: 148 Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Occupation Vice President and Chief Fin Aggregate Year-to-Date ▼ Capacity For: Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		Transaction ID: 148/1356 Amount of Each Receipt this Period	•		•
Medicorp Health System Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Occupation Vice President and Chief Fin Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 148 Amount of Each Rec C Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	250.00				FEC ID number of contributing
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 148 Amount of Each Rec Occupation Vice President of Finance Aggregate Year-to-Date ▼		n			Medicorp Health System
Mr. James C. Lewis Mailing Address 11 Steeplechase Road City State Zip Code Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt Transaction ID: 148 Occupation Vice President of Finance Aggregate Year-to-Date ▼ Primary General				Aggregate	Primary General
City State Zip Code Transaction ID: 148 Fredericksburg VA 22405-3312 FEC ID number of contributing federal political committee. C Name of Employer Medicorp Health System Receipt For: Primary General 1 2 2 1 Transaction ID: 148 Amount of Each Rec C Aggregate Year-to-Date ▼		Date of Receipt			
Fredericksburg VA 22405-3312 Amount of Each Rec FEC ID number of contributing federal political committee. C Name of Employer Medicorp Health System Receipt For: Primary General Aggregate Year-to-Date OCCUPATION Aggregate Year-to-Date OCCUPATION Amount of Each Rec Amount of Each Rec Amount of Each Rec Amount of Each Rec OCCUPATION OCCUPATION Amount of Each Rec OCCUPATION OC	2007			oad	Mailing Address 11 Steeplechase Road
FEC ID number of contributing federal political committee. Name of Employer Medicorp Health System Receipt For: Primary General C Occupation Vice President of Finance Aggregate Year-to-Date ▼		Transaction ID: 14871357	·		-
Receipt For: Primary General Aggregate Year-to-Date ▼	50.00	Amount of Each Receipt this Periods 50	22405-3312		FEC ID number of contributing
Primary General		_			Name of Employer Medicorp Health System
l l				Aggregate	Primary General
SUBTOTAL of Receipts This Page (optional)	550.00	550		J)	SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person not the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Marianna Bedway Mailing Address 8506 Mathew Mar	*	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Spotsylvania</u>	State Zip Code VA 22553-3813	Transaction ID: 14871359 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Medicorp Health System Receipt For: Primary General	Occupation Director, Organizational Development Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Edward Caldwell Mailing Address 6642 Sugar Ridge	250.00 e Drive SW	Date of Receipt
City	State Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14871361
Roanoke	VA 24018-7632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carilion Health System	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Toni R Ardabell, , R.N. Mailing Address 3300 Gallows Roa	ad	Date of Receipt 1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14871362
Falls Church FEC ID number of contributing federal political committee.	VA 22042-3307	Amount of Each Receipt this Period 250.00
Name of Employer Inova Fairfax Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (ontion	nal)	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 305 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		71	
Full Name (Last, First, Middle Initial) Mr. Dorka M. Picard, MHA, FACHE			Date of Receipt
Mailing Address 2300 Opitz Boulevar	d d		1 2 2 1 2 0 0 7
City Woodbridge	State VA	Zip Code	Transaction ID: 14871363
FEC ID number of contributing federal political committee.	C	22191-3311	Amount of Each Receipt this Period 250.00
Name of Employer Potomac Hospital	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Khalil J. Bouharoun			Date of Receipt
Mailing Address 2300 Opitz blvd			12 21 YYYYY 12 21 2007
City Woodbridge	State VA	Zip Code 22191-3311	Transaction ID: 14871367
FEC ID number of contributing federal political committee.	C	22191-3311	Amount of Each Receipt this Period 250.00
Name of Employer Potomac Hospital	Occupatio Vice Pres	n sident/ Cheif Information Off	- i
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kathy Tagnesi			Date of Receipt
Mailing Address 1840 Amherst Stree	t		M M / D D / Y Y Y Y Y Y 1 2 0 0 7
City Winchester	State VA	Zip Code 22601-2808	Transaction ID: 14871370
FEC ID number of contributing federal political committee.	C	22001-2000	Amount of Each Receipt this Period 250.00
Name of Employer Valley Health System	Occupatio Chief Nu	n rsing Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Peter J. Bernard			Date of Receipt
	Mailing Address 5801 Bremo Road			12 21 2007
	City Richmond	State VA	Zip Code	Transaction ID: 14871372
	FEC ID number of contributing federal political committee.	C	23226-1900	Amount of Each Receipt this Period 250.00
	Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation CEO	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
. –	Full Name (Last, First, Middle Initial) Ms. Barbara Kane			Date of Receipt
	Mailing Address 7102 Massaponax Ch	nurch		1 2 2 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 14871373
	Spotsylvania	VA	22553-2228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Medicorp Health System	Occupation Senior Vi	n ce President	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. Paul Chidester			Date of Receipt
	Mailing Address 1408 Five Hill Trail			12 21 2007
	City	State	Zip Code	Transaction ID: 14871376
	Virginia Beach	VA	23452-4704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Chesapeake General Hospit- al	_, -	dical Officer	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify) ▼		250.00	
	SUBTOTAL of Receipts This Page (optional)	1		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements mane name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Heidi L. Gartland Mailing Address 5958 Heather Lane			Date of Receipt
City Hudson	State OH	Zip Code 44236-4325	1 2 2 8 2 0 0 7 Transaction ID: 14871377 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer University Hospitals Receipt For: Primary General Other (specify) ▼	- '	nsident, Government Affairs e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Sean McKibben Mailing Address 44 Blaine Avenue			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14871378
Cleveland	OH	44146-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University Hospitals Bedf- ord Medical C Receipt For:	Occupation President Aggregate		
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Mr. James E Meyer	'		Date of Receipt
Mailing Address 335 Glessner Avenue	9		12 28 2007
City	State	Zip Code	Transaction ID: 14871379
Mansfield	OH	44903-2269	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer MedCentral Health System Receipt For:	_,	t and Chief Executive Officer	,
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			650.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Alan J Bleyer Mailing Address 400 Wabash Avenue City Akron FEC ID number of contributing federal political committee. Name of Employer Akron General Health System Receipt For: Primary General Other (specify)	State Zip Code OH 44307-2433 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr James R Davis Mailing Address P O Box 1790 City Youngstown FEC ID number of contributing federal political committee. Name of Employer St. Elizabeth Health Cent-	State Zip Code OH 44501-1790 C	Date of Receipt M M
er Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas S. Urban	Executive Vice President and Chief O Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Mailing Address 8484 Old Shaw Way City West Chester	State Zip Code OH 45069-6400	Transaction ID: 14871382 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Mercy Health Partners Receipt For:	Occupation Administrator	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Joann Plaster Mailing Address 676 Shelby-Ontario Ro	1	Date of Receipt
City	State Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14871383
Mansfield	OH 44906-1034	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer MedCentral Health System	Occupation Vice President, Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Donald Fair		Date of Receipt
Mailing Address 565 Northwood Drive		12 28 2007
City	State Zip Code	Transaction ID: 14871384
<u>Akron</u>	OH 44313-5307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Akron General Health Syst- em	Occupation Vice President of Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. W. Scott Fry		Date of Receipt
Mailing Address 8526 Royal Lythan Lar	ne	12 28 2007
City	State Zip Code	Transaction ID: 14871385
Holland	OH 43528-9011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Hospital Council of North- west Ohio	Occupation President & Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		375.00
TOTAL This Period (last page this line number	<u> </u>	

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 305 (check only one) X
or fo	rinformation copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Full Name (Last, First, Middle Initial) Ms. LeeAnn Lucas-Helber Mailing Address P O Box 966 City Logan FEC ID number of contributing ederal political committee. Name of Employer Hocking Valley Community Hospital Receipt For: Primary General	State Zip Code OH 43138-0966 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt M M
3. <u>!</u> !	Other (specify) Full Name (Last, First, Middle Initial) Mr. Kevin C Martin Mailing Address 630 East River Street City	State Zip Code	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14871387
f	Elyria FEC ID number of contributing rederal political committee. Name of Employer EMH Regional Medical Cent-	OH 44035-5902 C Occupation President and Chief Executive Office	Amount of Each Receipt this Period 350.00
	er Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00]
<u>.</u> 1	Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki Mailing Address 950 West Wooster Stre		Date of Receipt 1 2 2 8 2 0 0 7
_	City Bowling Green FEC ID number of contributing federal political committee.	State Zip Code OH 43402-2603	Transaction ID: 14871388 Amount of Each Receipt this Period 500.00
į	Name of Employer Wood County Hospital	Occupation President	
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
su	BTOTAL of Receipts This Page (optional)		975.00

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 305 (check only one) X
or for commercial purp	oses, other than using the name a	nts may not be sold or used by any person and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Fi Mr. Briggs W Andrev Mailing Address City Roanoke FEC ID number of federal political com	St V/Contributing mittee.		Date of Receipt 12 21 2007 Transaction ID: 14871396 Amount of Each Receipt this Period 250.00
Name of Employer Carilion Health Sys Receipt For: Primary Other (specif	General Agg	upation nior Vice President Legal Services gregate Year-to-Date ▼ 250.00	
Full Name (Last, Fi Mr. John Clark Mailing Address (rst, Middle Initial) 500 Jacks Mountain Rd		Date of Receipt 1 2 2 1 2 0 0 7
City Glade Hill FEC ID number of federal political com	v/contributing	ate Zip Code A 24092-3828	Transaction ID: 14871397 Amount of Each Receipt this Period 250.00
Name of Employer Carilion Franklin Mo Hospital Receipt For: Primary Other (specif	emorial Dire Agg General	ector Facility Services gregate Year-to-Date ▼ 250.00	
Full Name (Last, Fi Dr Gene Burke, , M.I Mailing Address			Date of Receipt
City Norfolk	St V/	ate Zip Code A 23507-1999	Transaction ID: 14871400 Amount of Each Receipt this Period
FEC ID number of federal political com	mittee.	upation	250.00
Name of Employer Sentara Norfolk Ge Hospital Receipt For: Primary Other (specify	neral Vice Agg General	e President Medical Affairs gregate Year-to-Date ▼ 250.00	
SUBTOTAL of Recei	ots This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Christopher L Wearmouth, , FACHE Mailing Address PO Box 13727		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Roanoke</u>	State Zip Code VA 24036-3727	Transaction ID: 14871403 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tazewell Community Hospit- al	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 507.50	
Full Name (Last, First, Middle Initial) Mr. Mark Szalwinski		Date of Receipt
Mailing Address 104 Watch Harbou	r Circle	12 21 2007
City	State Zip Code	Transaction ID: 14871424
Smithfield FEC ID number of contributing federal political committee.	VA 23430-2326	Amount of Each Receipt this Period 250.00
Name of Employer Sentara Healthcare	Occupation Director of Pharmacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Coletta Barrett, RN, MHA	1	Date of Receipt
Mailing Address 5000 Hennessy Bo	ulevard	1 2 2 8 2 0 0 7
City Baton Rouge	State Zip Code LA 70808-4375	Transaction ID: 14871449
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Clark R. Cosse, III Mailing Address 9521 Brookline Avenue City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer Louisiana Hospital Association Receipt For: Primary General Other (specify)	State Zip Code LA 70809-8409 C Occupation Vice President, Legal & Government Aggregate Year-to-Date 500.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Mark E Marley, , CHE Mailing Address P O Box 2009 City Natchitoches FEC ID number of contributing federal political committee. Name of Employer Natchitoches Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code LA 71457-2009 C Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / 28 / 2007 Transaction ID: 14871451 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Mark J Peters, , M.D. Mailing Address 4200 Houma Boulevar City Metairie FEC ID number of contributing federal political committee. Name of Employer East Jefferson General Hospital	State Zip Code LA 70006-2970 C Occupation President and Chief Executive Officer	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	not be sold or used by any persong dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Paul A. Salles Mailing Address 644 Apache Drive			Date of Receipt 1 2 2 8 2 0 0 7
City Abita Springs	State LA	Zip Code 70420-3331	Transaction ID: 14871453 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	C	n	500.00
Name of Employer Metropolitan Hospital Cou- ncil of New O Receipt For: Primary General Other (specify) ▼	Presiden	t & Chief Executive Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Terrie Sterling Mailing Address 5000 Hennessy Bou	ulevard		Date of Receipt 1 2 2 8 2 0 0 7
City	State	Zip Code	Transaction ID: 14871478
Baton Rouge	LA	70808-4375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Our Lady of the Lake Regional Medical Receipt For:		n perating Officer e Year-to-Date V	
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Ms. Karen Sue Zoeller	<u>'</u>		Date of Receipt
Mailing Address 9521 Brookline Ave	nue		12 28 2007
City	State LA	Zip Code	Transaction ID: 14871479
Baton Rouge FEC ID number of contributing federal political committee.	C	70809-1431	Amount of Each Receipt this Period 500.00
Name of Employer Louisiana Hospital Associ- ation	Occupatio Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	1		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kevin Bridwell Mailing Address 9521 Brookline City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer Louisiana Hospital Association Receipt For: Primary General Other (specify)	State Zip Code LA 70809-1431 C Occupation Director of Healthcare Reimbursement Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. James E Cathey, , Jr. Mailing Address P O Box 2668 City Hammond FEC ID number of contributing federal political committee. Name of Employer North Oaks Medical Center Receipt For: Primary General Other (specify)	State Zip Code LA 70404-2668 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 8 / 2 0 0 7 Transaction ID: 14871481 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Robert C. Davidge Mailing Address 5000 Hennessy Boulev City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer Our Lady of the Lake Regional Medical Receipt For: Primary General Other (specify)	State Zip Code LA 70808-4375 C Occupation President & Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / 28 / 2007 Transaction ID: 14871482 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 305 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Marcia Fries Mailing Address 9521 Brookline Ave	enue		Date of Receipt 1 2 2 8 2 0 0 7
City Baton Rouge FEC ID number of contributing federal political committee.	State LA	Zip Code 70809-8409	Transaction ID: 14871487 Amount of Each Receipt this Period 250.00
Name of Employer Louisiana Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n acy Preparedness Manager e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Patrick E. Haggerty Mailing Address 2450 Severn Avenu #210 City Metairie	Jue State LA	Zip Code 70001-1931	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14871488 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer ShareSTAFF, LLC Receipt For: Primary General Other (specify) ▼	Occupation Presiden Aggregate		250.00
Full Name (Last, First, Middle Initial) Dr. Patrick J Quinlan, , M.D. Mailing Address 1514 Jefferson Higl	hway		Date of Receipt
City New Orleans FEC ID number of contributing federal political committee.	State LA	Zip Code 70121-2484	Transaction ID: 14871489 Amount of Each Receipt this Period 250.00
Name of Employer Ochsner Health System Receipt For: Primary General Other (specify) ▼		n ecutive Officer e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al))	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jennifer Steel		Date of Receipt
Mailing Address 3653 Lake Aspen Ea		12 28 2007
City Gretna	State Zip Code LA 70072	Transaction ID: 14871490
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer West Jefferson Medical Center Receipt For: Primary General	Occupation Chief Community Relations Officer Aggregate Year-to-Date ▼	_
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Jeff Limbocker	250.00	Date of Receipt
Mailing Address P O Box 4027		M M / D D / Y Y Y Y Y Y Y 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14871494
<u>Lafayette</u>	LA 70502-4027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Our Lady of Lourdes Regio- nal Medical C	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Warner L Thomas		Date of Receipt
Mailing Address 1514 Jefferson High	way	12 / 28 / 2007
City	State Zip Code	Transaction ID: 14871508
New Orleans FEC ID number of contributing	LA 70121-2484	Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer	Occupation	-
Name of Employer Ochsner Medical Center Receipt For:	President and Chief Operating Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	625.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 305 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Emil P Miller Mailing Address 110 Longwood Ave City Rockledge	nue State Zip Code FL 32955-2828	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Wuesthoff Health System Receipt For: □ Primary □ General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	175.00
Full Name (Last, First, Middle Initial) Dr Christain C Patrick, , M.D., Ph Mailing Address 671 Biltmore Way Unit 101 City Coral Gables FEC ID number of contributing federal political committee. Name of Employer Miami Children's Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33134-7502 C Occupation Chief Medical Officer and Senior Vice Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms Ginger Oliver Mailing Address P O Box 1289 City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33601-1289 C Occupation Vice President Information Systems Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	J)	425.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 305 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	13 14 15 16
NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Maureen Ogden		Date of Receipt
Mailing Address 3857 Lake Joyce Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 14871550
Land O Lakes	FL 34639-4698	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Wayne NeSmith Mailing Address 1105 Carriage Road		Date of Receipt
		12 21 2007
City	State Zip Code	Transaction ID: 14871551
Tallahassee FEC ID number of contributing federal political committee.	FL 32312-2501	Amount of Each Receipt this Period 1000.00
Name of Employer Florida Hospital Associat- ion	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson	<u> </u>	Date of Receipt
Mailing Address Post Office Box 1289		12 21 7 2007
City	State Zip Code	Transaction ID: 14871552
Tampa	FL 33601-1289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Sr. Vice President, Patient Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
OUDTOTAL of Descripto This Description		1500.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than	orts and Statements may not be sold or used by any personusing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial Mr. James R Nathan		Date of Receipt
Mailing Address 636 Del Prado	Boulevard	12 21 2007
City	State Zip Code	Transaction ID: 14871553
Cape Coral	FL 33990-2695	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cape Coral Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial Ms. Paula McGuiness		Date of Receipt
Mailing Address 14655 Village	Glen Circle	12 21 2007
City	State Zip Code	Transaction ID: 14871554
<u>Tampa</u>	FL 33618-2733	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer BayCare Health System	Occupation Administrator	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	250.00	
Full Name (Last, First, Middle Initial Ms. Mary McGillicuddy		Date of Receipt
Mailing Address 2820 SE 19th	Place	12 21 2007
City	State Zip Code	Transaction ID: 14871555
Cape Coral	FL 33904-4015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Lee Memorial Hospital	Occupation Chief Legal Counsel	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00]
SUBTOTAL of Receipts This Page (o	ptional)	750.00
	e number only)	

•••	EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Marjory May		Date of Receipt
	Mailing Address 1986 Stevenson Road	State Zip Code	12 21 2007
	City North Fort Myers	FL 33917-3237	Transaction ID: 14871557
	FEC ID number of contributing federal political committee.	C 33917-3237	Amount of Each Receipt this Period 150.00
	Name of Employer Lee Memorial Hospital	Occupation System Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Mr. Lloyd Maliner		Date of Receipt
	Mailing Address 11113 Blackhawk Road		12 21 2007
	City	State Zip Code	Transaction ID: 14871559
	Davie	FL 33328-2107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	225.00
	Name of Employer Memorial Healthcare System	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) Mr. Paul Malek		Date of Receipt
	Mailing Address 625 Buttonwood Lane		12 21 2007
	City	State Zip Code	Transaction ID: 14871560
	Miami	FL 33137-3359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Memorial Healthcare System	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)		625.00

NAME OF COM American Hos Full Name (Last Ms. Lorraine L. L Mailing Address City Tampa FEC ID number federal political of Name of Employ St. Joseph's Ho Receipt For: Primary Other (spe Full Name (Last Mr. Jeffrey M. Fri Mailing Address City Lewes FEC ID number federal political of Name of Employ Beebe Medical of Receipt For: Primary Other (spe Full Name (Last Dr. Robert J Last Mailing Address	AMITTEE (In Full) spital Association PAC t, First, Middle Initial) utton 6 6508 North River Boule 7 of contributing committee. yer spital General ecify) t, First, Middle Initial)	State FL C Occupation Chief Oper	Zip Code ating Officer ear-to-Date Zip Code	Date of Receipt Date of Receipt M M M 12 14 15 16 Date of Receipt Transaction ID: 14871561 Amount of Each Receipt this Period Date of Receipt Date of Receipt 125.00 Date of Receipt Transaction ID: 14874160
American Hose Full Name (Last Ms. Lorraine L. L. Mailing Address City Tampa FEC ID number federal political of the second sec	spital Association PAC t, First, Middle Initial) utton 6 6508 North River Boule of contributing committee. yer spital General ecify) t, First, Middle Initial) led, , FACHE	State FL C Occupation Chief Oper Aggregate Y	ating Officer ear-to-Date ▼ 250.00	M
Ms. Lorraine L. L Mailing Address City Tampa FEC ID number federal political of the second standard	utton 6 6508 North River Boule 7 of contributing committee. yer spital General ecify) t, First, Middle Initial) led, , FACHE	State FL C Occupation Chief Oper Aggregate Y	ating Officer ear-to-Date ▼ 250.00	M
City Tampa FEC ID number federal political of St. Joseph's Howard Howard Howard Howard Howard Howard Howa	of contributing committee. yer spital General ecify)	State FL C Occupation Chief Oper Aggregate Y	ating Officer ear-to-Date ▼ 250.00	1 2 2 1 2 0 0 7 Transaction ID: 14871561 Amount of Each Receipt this Period 125.00 Date of Receipt
FEC ID number federal political of St. Joseph's House of Employ St. Joseph's House Primary Other (specific primary of Employ Beebe Medical of Receipt For: Primary Primary	committee. yer spital General ecify) ▼ i, First, Middle Initial) led, , FACHE	C Occupation Chief Oper Aggregate Y	ating Officer ear-to-Date ▼ 250.00	Amount of Each Receipt this Period 125.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Full Name (Last Mr. Jeffrey M. Fri Mailing Address City Lewes FEC ID number federal political of Beebe Medical of Receipt For: Primary Other (specific of the Control of Second Political Office of Second Political Offic	ecify) i, First, Middle Initial) ed, , FACHE	Aggregate Y	ear-to-Date ▼ 250.00	12 20 7 2007
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Mr. Jeffrey M. Fri Mailing Address City Lewes FEC ID number federal political of the second management of the second ma	ed, , FACHE		Zip Code	12 20 7 2007
Mailing Address City Lewes FEC ID number federal political of the second seco	* *		Zip Code	12 20 7 2007
Lewes FEC ID number federal political of Name of Employ Beebe Medical of Receipt For: Primary Other (specific Name (Last Dr. Robert J Last Mailing Address			Zip Code	
Receipt For: Primary Other (spe		DE		
Receipt For: Primary Other (spe			19958-1462	Amount of Each Receipt this Period
Receipt For: Primary Other (spe		С		500.00
Primary Other (spe	yer Center	Occupation President a	and Chief Executive Officer	-
Dr. Robert J Lask Mailing Address	General ecify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
	t, First, Middle Initial) kowski, , M.D.			Date of Receipt
	P O Box 1668			12 20 YYYYY 12 20 2007
City		State	Zip Code	Transaction ID: 14874161
Wilmington		DE	19899-1668	Amount of Each Receipt this Period
FEC ID number federal political of		C		1050.00
Name of Employ Christiana Care stem	yer Health Sy-	Occupation President a	and Chief Executive Officer	
Receipt For:	1	Aggregate Y	ear-to-Date ▼	
Primary Other (spe	General	1 1 1	1050.00	

TOTAL This Period (last page this line number only)

	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Bould		Date of Receipt 1 2 2 1 2 0 0 7
City Nachvilla	State Zip Code TN 37210-4634	Transaction ID: 14876004
Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. Vice President, Government Affairs Aggregate Year-to-Date ▼ 250.00	S S
Full Name (Last, First, Middle Initial) Mr. Scott Bowman Mailing Address 304 Wright Street		Date of Receipt
City	State Zip Code	Transaction ID: 14876005
Sweetwater	TN 37874-2897	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sweetwater Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Chris Clarke		Date of Receipt
Mailing Address 500 Interestate Blvo	I. South	1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14876007
<u>Nashville</u>	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Senior Vice President, Clinical and Pr	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any pers g the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James L. Goodloe Mailing Address 500 Interstate Blvd		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Nashville	State Zip Code TN 37210-4634	Transaction ID: 14876012 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Tennessee Hospital Association Receipt For: Primary General Other (specify)	Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robert S. Gordon Mailing Address 7891 Cross Pike D	rive	Date of Receipt 1 2 2 1 2 0 0 7
City	State Zip Code	Transaction ID: 14876013
<u>Germantown</u>	TN 38138-8117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Memorial Health Care Corporati Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President & CAO Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Bill Jolley		Date of Receipt
Mailing Address 500 Interstate Blvd	., South	12 21 2007
City	State Zip Code	Transaction ID: 14876016
Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (option	al)	1000.00

copied from such Reports and Statal purposes, other than using the national purposes. Of the purpose of the pur	State TN C Occupation President a Aggregate Ye State TN C Occupation	zip Code 38120-2177 and Chief Executive Office ear-to-Date ▼ Zip Code 37403-2163	Date of Receipt Date of Receipt
Hospital Association PAC ast, First, Middle Initial) Curtis Reynolds ass 350 North Humphreys Brown of contributing al committee. Dloyer orial Health atti General specify) ast, First, Middle Initial) ass 975 East Third Street as per of contributing al committee.	State TN C Occupation President a Aggregate Ye State TN C Occupation	nd Chief Executive Office ear-to-Date ▼ 250.00 Zip Code	Transaction ID: 14876023 Amount of Each Receipt this Period 250.00 Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
curtis Reynolds 288 350 North Humphreys Bound of Contributing al committee. 29 Solver 20 General 20 Specify) 20 Sess 975 East Third Street 20 Specifical Specifical Street 20 Specifical Specifical Street 20 Specifical Speci	State TN C Occupation President a Aggregate Ye State TN C Occupation	nd Chief Executive Office ear-to-Date ▼ 250.00 Zip Code	Transaction ID: 14876023 Amount of Each Receipt this Period 250.00 Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
per of contributing all committee. ployer prial Health atti General specify) ast, First, Middle Initial) a Woodard-Thompson pass 975 East Third Street per of contributing all committee.	State TN C Occupation President a Aggregate Ye State TN C Occupation	nd Chief Executive Office ear-to-Date ▼ 250.00 Zip Code	1 2 2 1 2 0 0 7 Transaction ID: 14876023 Amount of Each Receipt this Period 250.00 er
al committee. ployer orial Health atti General specify) ast, First, Middle Initial) a Woodard-Thompson ass 975 East Third Street per of contributing al committee.	TN C Occupation President a Aggregate Ye State TN C	nd Chief Executive Office ear-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
al committee. ployer orial Health atti General specify) ast, First, Middle Initial) a Woodard-Thompson ass 975 East Third Street per of contributing al committee.	Occupation President a Aggregate Ye State TN C	nd Chief Executive Office ear-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
General specify) ast, First, Middle Initial) a Woodard-Thompson ass 975 East Third Street ga per of contributing al committee.	State TN C Occupation	ear-to-Date ▼ 250.00 Zip Code	Date of Receipt M M J 2 1 2 0 0 7 Transaction ID: 14876026 Amount of Each Receipt this Period
a Woodard-Thompson ess 975 East Third Street ga per of contributing al committee.	TN C Occupation	•	Transaction ID: 14876026 Amount of Each Receipt this Period
per of contributing al committee.	TN C Occupation	•	Transaction ID: 14876026 Amount of Each Receipt this Period
per of contributing al committee.	TN C Occupation	•	Amount of Each Receipt this Period
per of contributing al committee.	C	07400 2100	
oloyer Ilth System			
	I Executive v	ice President and COO	
y General specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
ast, First, Middle Initial) lacEwan			Date of Receipt
ess 521 Wall Street			12 28 2007
	State	Zip Code	Transaction ID: 14876096
	C	98121-1536	Amount of Each Receipt this Period 250.00
oloyer I Eastside Hos-			ver
	Aggregate Ye	ear-to-Date ▼ 250.00	
			750.00
	per of contributing all committee. ployer in Eastside Hos- General specify) Receipts This Page (optional)	Deer of contributing all committee. C	WA 98121-1536 Deer of contributing all committee. Coccupation Vice President, Public Affairs & Gov Aggregate Year-to-Date ✓ General specify) ▼ 250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 229 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	r for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Judy Hodgson Mailing Address 2830 206th Terrace NI	_	Date of Receipt
			12 28 2007
	City Sammamish	State Zip Code WA 98074-4369	Transaction ID: 14876097 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer PeaceHealth	Occupation Sr. Vice President, Organizational De	v
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Ms. Andrea Nenzel	Date of Receipt	
	Mailing Address 14432 SE Eastgate W	12 28 2007	
	City	State Zip Code	Transaction ID: 14876098
	Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period 250.00
	Name of Employer PeaceHealth	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. John Mudd		Date of Receipt
	Mailing Address 506 Second Avenue, S	12 28 2007	
	City	State Zip Code	Transaction ID: 14876099
	Seattle FEC ID number of contributing federal political committee.	WA 98104-2329	Amount of Each Receipt this Period 250.00
	Name of Employer Providence Health & Servi- ces	Occupation Senior Vice President, Mission Leade	rs
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 230 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any per- the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Henry Turner Mailing Address 1654 103rd S.E. City	State Zip Code	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
Bellevue FEC ID number of contributing federal political committee.	WA 98004-7001	Amount of Each Receipt this Period 250.00
Name of Employer Swedish Health Services Receipt For: Primary General Other (specify) ▼	Occupation Chairman Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Chuck Lytle Mailing Address 747 Broadway Ave	nue	Date of Receipt 1 2 2 8 2 0 0 7
City	Transaction ID: 14876101	
Seattle	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation Administrator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen P. Zieniewicz, CHE Mailing Address 1959 NE Pacific St.	, Box 356151	Date of Receipt 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14876102
Seattle FEC ID number of contributing federal political committee.	WA 98195-0001	Amount of Each Receipt this Period 250.00
Name of Employer University of Washington Medical Cente	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	n	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Check only one)
Ai	ny information copied from such Reports and Si for commercial purposes, other than using the	atements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Mr. Len McComb		Date of Receipt
	Mailing Address 300 Elliott Avenue Wes Suite 300	t	12 28 2007
	City	State Zip Code	Transaction ID: 14876103
	Seattle	WA 98119-4198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Washington State Hospital Association	Occupation Lobbyist/Government Relations	Officer
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
-	Full Name (Last, First, Middle Initial) Ms. Sarah Patterson		Date of Receipt
	Mailing Address 1100 Ninth Avenue		12 28 2007
	City	State Zip Code	Transaction ID: 14876104
	Seattle	WA 98101-2756	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Virginia Mason Medical Ce- nter	Occupation Administrator	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	ס "
_	Full Name (Last, First, Middle Initial) Mr. Randy Revelle		Date of Receipt
	Mailing Address 2809 39th Avenue Wes	t	12 28 2007
	City	State Zip Code	Transaction ID: 14876105
	Seattle	WA 98119-4198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.50
	Name of Employer Washington State Hospital Association	Occupation Vice President, Policy & Public A	Affair
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1125.50	0 "
			725.50

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 305 (check only one) X
0	any information copied from such Reports and S or for commercial purposes, other than using the	statements may no name and addres	t be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Nancy Steiger Mailing Address 2901 Squalicum Parky			Date of Receipt
		vay		12 28 2007
	City <u>Be</u> llingham	State WA	Zip Code 98225-1851	Transaction ID: 14876106
	FEC ID number of contributing federal political committee.	C	30225-1051	Amount of Each Receipt this Period 250.00
	Name of Employer St. Joseph Hospital	Occupation Chief Execu	tive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) Mr Greg Van Pelt Mailing Address 506 Second Avenue, S	L Suite 1200		Date of Receipt
		12 28 2007		
	City Seattle	State WA	Zip Code 98104-2329	Transaction ID: 14876107 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30104-2323	500.00
	Name of Employer Providence Health & Servi- ces	Occupation Vice Preside	ent and Chief Regional O	per
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. David E Jaffe			Date of Receipt
	Mailing Address 325 Ninth Avenue, Box 359717			1 2 2 8 2 0 0 7
	City	State	Zip Code	Transaction ID: 14876108
	Seattle FEC ID number of contributing federal political committee.	C	98104-2499	Amount of Each Receipt this Period 500.00
	Name of Employer Harborview Medical Center	Occupation Former Exec	cutive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1250.00
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		<u> </u>	12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 233 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	l Statements man he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. James H Skogsbergh Mailing Address 2025 Windsor Drive			Date of Receipt 1 2 2 8 2 0 0 7
City Oak Brook FEC ID number of contributing federal political committee.	State IL C	Zip Code 60523-1586	Transaction ID: 14877309 Amount of Each Receipt this Period 500.00
Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼		t and Chief Executive Officer Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr William P Santulli Mailing Address 2025 Windsor Drive	'		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Oak Brook FEC ID number of contributing federal political committee.	State IL C	Zip Code 60523-1586	Transaction ID: 14877310 Amount of Each Receipt this Period 800.00
Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼	_ '	n e Vice President and Chief O e Year-to-Date ▼ 800.00	ppe
Full Name (Last, First, Middle Initial) Mr. Patrick M Magoon Mailing Address 2300 Children's Plaz	a		Date of Receipt
City Chicago FEC ID number of contributing federal political committee.	State IL	Zip Code 60614-3394	1 2 2 8 2 0 0 7 Transaction ID: 14877312 Amount of Each Receipt this Period 800.00
Name of Employer Children's Memorial Hospital Receipt For: Primary Other (specify) ▼	- 	n t and Chief Executive Officer e Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)			2100.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 234 / 305 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Keith E Steffen Mailing Address 530 NE Glen Oak Ave City Peoria FEC ID number of contributing federal political committee. Name of Employer OSF Saint Francis Medical Center	State Zip Code IL 61637-0001 C Occupation Administrator and Chief Executive Or	Date of Receipt M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00]
Full Name (Last, First, Middle Initial) Mr. K. Bruce Stickler Mailing Address 333 West Wacker Dri Suite 172 City	ve State Zip Code	Date of Receipt M
Chicago FEC ID number of contributing federal political committee.	IL 60606-1220	Amount of Each Receipt this Period 300.00
Name of Employer Mount Sinai Hospital Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 300.00]
Full Name (Last, First, Middle Initial) Mr. Robert T. Clarke	Date of Receipt	
Mailing Address 800 North Rutledge S City	treet State Zip Code	1 2 2 8 2 0 0 7 Transaction ID: 14877319
Springfield FEC ID number of contributing	IL 62781-0002	Amount of Each Receipt this Period 300.00
rederal political committee. Name of Employer Memorial Health System	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1302.50	
SURTOTAL of Receipts This Page (optional)		900.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c	→ -
or fo	information copied from such Reports and S r commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	13 14 15 n for the purpose of soliciting c solicit contributions from such	ontributions
	American Hospital Association PAC ull Name (Last, First, Middle Initial)				
\. <u>N</u>	fr. David S. Fox failing Address 3815 HIghland Avenue	e		Date of Receipt 1 2 2 8	2007
	ity Downers Grove	State IL	Zip Code 60515-1500	Transaction ID: 148773 Amount of Each Receipt	
	EC ID number of contributing ederal political committee.	C			300.00
Α	lame of Employer dvocate Good Samaritan lospital	Occupatio Presiden			
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00		
3. <u>D</u>	ull Name (Last, First, Middle Initial) or. Wayne M Lerner, , DPH Mailing Address 2701 West 68th Stree	t		Date of Receipt	YYYY
_	ity	State	Zip Code	1 2 2 8 Transaction ID: 14877	2007
	Chicago	IL	60629-1813	Amount of Each Receipt	
F	EC ID number of contributing ederal political committee.	C			300.00
N H	ame of Employer loly Cross Hospital	Occupatio Presiden	n t and Chief Executive Officer	1	
R	eceipt For:	Aggregate	e Year-to-Date		
	Primary ☐ General Other (specify) ▼	0 0	1300.00		
	ull Name (Last, First, Middle Initial) fr. Dennis C Millirons, , FACHE	•		Date of Receipt	
_	failing Address 801 S Milwaukee Aver	nue		12 28	2007
	ity .ibertyville	State IL	Zip Code 60048-3204	Transaction ID: 14877: Amount of Each Receipt	
F	EC ID number of contributing ederal political committee.	C	00070 0207	Amount of Each recept	300.00
N C	ame of Employer Condell Medical Center	Occupatio Presiden	n t and Chief Executive Officer		
R	leceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00		
SUE	BTOTAL of Receipts This Page (optional)				900.00
тот	FAL This Period (last page this line number	only)	.		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 305 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	C		
Full Name (Last, First, Middle Initial) Ms. Patricia Shehorn			Date of Receipt
Mailing Address 1225 Lake Street			12 28 2007
City Melrose Park	State IL	Zip Code 60160-4000	Transaction ID: 14877323 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00100-4000	300.00
Name of Employer Westlake Hospital	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) Dr. Ann Emichetti, MD			Date of Receipt
Mailing Address 17800 South Kedzie	12 28 2007		
City Hazel Crest	State IL	Zip Code	Transaction ID: 14877333
FEC ID number of contributing federal political committee.	C	60429-2029	Amount of Each Receipt this Period 300.00
Name of Employer Advocate South Suburban Hospital	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth W Lukhard			Date of Receipt
Mailing Address 4440 West 95th Str	1 2 2 8 2 0 0 7		
City Oak Lawn	State IL	Zip Code 60453-2600	Transaction ID: 14877334 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00433-2000	300.00
Name of Employer Advocate Christ Medical Center	Occupatio Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00]
SUBTOTAL of Receipts This Page (optional			900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert G Senneff, , FACHE Mailing Address 210 West Walnut St	treet State Zip Code	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14877335
Princeton FEC ID number of contributing federal political committee.	IL 61520-2497	Amount of Each Receipt this Period 800.00
Name of Employer Graham Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Ms. Lori Williams Mailing Address 1151 East Warrenvi	lle Road	Date of Receipt
City Naperville	State Zip Code IL 60563-9339	Transaction ID: 14877337 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illinois Hospital Associa- tion Receipt For:	Occupation Vice President	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Ann C. Guild		Date of Receipt
Mailing Address 1151 E. Warrenville PO Box 3015	Rd.	12 28 2007
City <u>Naperville</u>	State Zip Code IL 60563-9339	Transaction ID: 14877341 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	362.50
Name of Employer Illinois Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1029.22	
SUBTOTAL of Receipts This Page (optional		1462.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 305 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Mark Deaton Mailing Address 740 North Hayes City	State	Zip Code	Date of Receipt 1 2 2 8 2 0 0 7 Transaction ID: 14877342
Oak Park FEC ID number of contributing federal political committee.	C	60302-1706	Amount of Each Receipt this Period 362.50
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	- ' ' - ' - ' - ' - ' - ' - ' - ' - ' -	n General Counsel e Year-to-Date ▼ 1029.22	
Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenv	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 14877344
<u>Naperville</u>	<u>IL</u>	60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		600.00
Name of Employer Illinois Hospital Associa- tion		of Development	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III	•		Date of Receipt
Mailing Address 4109 Southwoods I	Road		12 28 2007
City	State	Zip Code	Transaction ID: 14877345
Springfield FEC ID number of contributing federal political committee.	C	62707-6070	Amount of Each Receipt this Period 693.75
Name of Employer Illinois Hospital Associa- tion		ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1693.75	
SUBTOTAL of Receipts This Page (optional	al)		1656.25

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 305 (check only one) X
2	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. John Bomher		Date of Receipt
	Mailing Address 1151 E. Warrenville F		12 28 2007
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 14877611 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Illinois Hospital Associa- tion	Occupation VP, Associate General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
	Full Name (Last, First, Middle Initial) Mr. Kenneth C. Robbins Mailing Address 1531 Maria Court		Date of Receipt
		12 28 2007	
	City Wheaton	State Zip Code IL 60187-3777	Transaction ID: 14877612 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	693.75
	Name of Employer Illinois Hospital Associa-	Occupation President	
	tion Receipt For: Primary General	Aggregate Year-to-Date ▼	7
	Other (specify)	1693.75	
	Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges		Date of Receipt
	Mailing Address 1151 E. Warrenville F PO Box 3015	Road	12 28 2007
	City	State Zip Code	Transaction ID: 14877615
	Naperville FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 693.75
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1693.75	
Г		I	1987.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 240 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer		Date of Receipt
	Mailing Address 1755 Maple Lane		12 28 2007
	City Wheaton	State Zip Code IL 60187-3317	Transaction ID: 14902541 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	697.83
	Name of Employer Central DuPage Hospital	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1676.13	
. –	Full Name (Last, First, Middle Initial) Mr. John J. Raleigh	D. d	Date of Receipt
	Mailing Address 1141 East Warrenville	12 28 2007	
	City	State Zip Code	Transaction ID: 14902542
	Naperville FEC ID number of contributing federal political committee.	IL 60563-1493	Amount of Each Receipt this Period 600.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1750.00	
_	Full Name (Last, First, Middle Initial) Ms. Kathleen Dunn	I	Date of Receipt
-	Mailing Address 700 South Second St	1 2 2 8 2 0 0 7	
	City	State Zip Code	Transaction ID: 14902543
	Springfield FEC ID number of contributing federal political committee.	IL 62704-2516	Amount of Each Receipt this Period 750.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Assistant VP, Gov't Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1250.00	
	NIPTOTAL (D Ti. D ()		2047.83

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A oı	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr Daniel E Baker		Date of Receipt
	Mailing Address 800 NE Glen Oak Ave		12 28 7 2007
	City Peoria	State Zip Code IL 61603-3200	Transaction ID: 14918015
	FEC ID number of contributing federal political committee.	IL 61603-3200	Amount of Each Receipt this Period 500.00
	Name of Employer OSF Healthcare System	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Darcie J. Brazel		Date of Receipt
	Mailing Address 11654 Logan Court		12 28 2007
	City	State Zip Code	Transaction ID: 14918028
	Orland Park	IL 60467-6824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advocate Christ Medical Center	Occupation COO, CNE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
. —	Full Name (Last, First, Middle Initial) Mr Robert Christie		Date of Receipt
	Mailing Address 240 East Ontario Stree Suite 500		12 28 7 2007
	City Chicago	State Zip Code IL 60611-3223	Transaction ID: 14918030
	FEC ID number of contributing federal political committee.	IL 60611-3223	Amount of Each Receipt this Period 350.00
	Name of Employer Northwestern Memorial Hos- pital	Occupation VP, Government and Legislative Rela	ıtio
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
			1100.00

City Hazel Crest IL 60429-2029 FEC ID number of contributing federal political committee. Name of Employer Advocate South Suburban Hospital Receipt For:	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 242 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. A	or for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A. Dr. Ann Errichett, M.D. Malling Address 17800 South Kedzie Avenue City Hazel Crest IL 60429-2029 FEC ID number of contributing federal political committee. Name of Employer Advocate South Suburban Hospital Receipt For: Primary General Other (specify) ▼ In Il Name (Last, First, Middle Initial) Manae of Employer Northwestern Memorial Hospital Receipt For: Primary General Occupation President Aggregate Year-to-Date ▼ 12 Transaction ID: 14919817 Amount of Each Receipt his Perioc 500.0 Transaction ID: 14919817 Amount of Each Receipt his Perioc 12 12 12 12 12 13 Mount of Each Receipt his Perioc 12 13 Date of Receipt Transaction ID: 14919822 Amount of Each Receipt his Perioc 12 13 Date of Receipt 12 13 Date of Receipt 12 12 13 Mount of Each Receipt his Perioc 12 13 Date of Receipt 14 15 15 16 17 17 17 18 18 19 19 10 10 10 10 10 10 10 10			
City State Zip Code Hazel Crest IL 60429-2029 Name of Employer Advocate South Suburban Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jeff Hill Malling Address 215 Summit Street City State Zip Code IL 6036-1897 Full Name (Last, First, Middle Initial) Mr. Jeff Hill Malling Address 215 Summit Street City State Zip Code President Aggregate Year-to-Date ▼ Date of Receipt For: Primary General Occupation President Aggregate Year-to-Date ▼ Date of Receipt President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Inis Period Transaction ID: 14919822 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt Inis Period Date of Receipt Date of Receipt Date of Receipt Date of Receipt Inis Period Date of Receipt Inis Period Date of Receipt Dat	Dr. Ann Errichetti, , M.D.		-
Hazel Crest FEC ID number of contributing federal political committee. Name of Employer Advocate South Suburban President Roceipt For: Primary General C	Mailing Address 1/800 South Kedzie A	Avenue	
FEC ID number of contributing federal political committee. Name of Employer Advocate South Suburban Hospital Beceipt For: Primary General Other (specify) ▼	-		
Name of Employer Advocate South Suburban Hospital Receipt For:		IL 60429-2029	Amount of Each Receipt this Period
Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dean M Harrison Mailing Address 251 East Huron Street City Chicago FEC ID number of contributing federal Political committee. Name of Employer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ City State Zip Code IL 60611-2908 Cocupation President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ City State Zip Code 1000.00 Transaction ID: 14919822 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Date of Receipt Tansaction ID: 14919822 Amount of Each Receipt this Period 1000.00 Date of Receipt Transaction ID: 14919822 Amount of Each Receipt ID: 14919822 Amount of Each Receipt ID: 14919823 Amount of E		С	500.00
Receipt For:	Name of Employer Advocate South Suburban Hospital	· '	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dean M Harrison Mailing Address 251 East Huron Street City Chicago IL 60611-2908 FEC ID number of contributing federal political committee. Name of Employer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jer Northwestern Memorial Hospital Date of Receipt 1000.0 Transaction ID: 14919823 Amount of Each Receipt this Period Table State Zip Code IL 61036-1697 FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Receipt For: Primary General Occupation Chief Executive Officer Receipt For: Primary General Aggregate Year-to-Date ▼ Receipt For: Primary General	Receipt For:	Aggregate Year-to-Date ▼	
Mailing Address 251 East Huron Street City State Zip Code IL 60611-2908 FEC ID number of contributing federal political committee. Name of Employer Northwestern Memorial Hospital Receipt For: Primary General Other (specify) ▼ City State Zip Code IL 60611-2908 Cocupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Transaction ID: 14919822 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Date of Receipt 1000.0 Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt 1000.0 Date of Receipt 1000.0 Date of Receipt 1000.0 Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Amount of Each Receipt this Period Transaction ID: 14919823 Transaction ID: 14919823 Transaction ID: 14919823 Transaction ID: 14919823 Transaction ID: 14919823	7 —		
City State Zip Code IL 60611-2908	,		Date of Receipt
Chicago L 60611-2908 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C			
FEC ID number of contributing federal political committee. Name of Employer Northwestern Memorial Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jeff Hill Mailing Address 215 Summit Street City State Zip Code IL 61036-1697 FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Name of Employer Midwest Medical Center Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 1000.0 Date of Receipt 12 2 8 7 2 0 0 Transaction ID: 14919823 Amount of Each Receipt this Period State Chief Executive Officer Receipt For: Primary General Aggregate Year-to-Date ▼	•		
Name of Employer Northwestern Memorial Hospital Receipt For: Primary		IL 60611-2908	Amount of Each Receipt this Period
pital		C	1000.00
Primary General Other (specify) ▼ Date of Receipt	pital	President and Chief Executive Officer	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jeff Hill Mailing Address 215 Summit Street City Galena FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Receipt For: Occupation Chief Executive Officer Aggregate Year-to-Date ▼ Primary General Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Aggregate Year-to-Date ▼	
Mailing Address 215 Summit Street City State Zip Code Galena IL 61036-1697 FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Receipt For: Primary General Date of Receipt **Transaction ID: 14919823 Amount of Each Receipt this Period 350.6		1000.00	
City Galena FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Receipt For: Primary State Zip Code Transaction ID: 14919823 Amount of Each Receipt this Period 350.0	, , , ,		Date of Receipt
Galena IL 61036-1697 Amount of Each Receipt this Period 350.0 Period C Name of Employer Midwest Medical Center Receipt For: Primary General Amount of Each Receipt this Period 350.0	Mailing Address 215 Summit Street		
FEC ID number of contributing federal political committee. Name of Employer Midwest Medical Center Receipt For: Primary General C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	•	'	
Federal political committee. Name of Employer Midwest Medical Center Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date 350.00		IL 61036-1697	Amount of Each Receipt this Period
Midwest Medical Center Chief Executive Officer Receipt For: Primary General Aggregate Year-to-Date ▼		C	350.00
Primary General 350,00		· ·	
250.00		Aggregate Year-to-Date ▼	
		350.00	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		1850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 243 / 305 (check only one) X 11a
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steven L. Hunter, FACHE Mailing Address 19065 Hickory Creek D City Mokena FEC ID number of contributing federal political committee. Name of Employer Provena Health Receipt For: Primary General Other (specify)	Orive, 300 State Zip Code IL 60448-8599 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 8 2 0 0 7 Transaction ID: 14919824 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Ms. Michelle Janney Mailing Address 1620 Meadow Lane City Glenview FEC ID number of contributing federal political committee. Name of Employer Northwestern Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code IL 60025-2350 C Occupation VP/Chief Nurse Executive Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. William B Leaver Mailing Address 2701 17th Street City Rock Island FEC ID number of contributing federal political committee. Name of Employer Trinity Medical Center-West Receipt For: Primary General Other (specify)	State Zip Code IL 61201-5351 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 800.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	1175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 244 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kenneth W Lukhard		Date of Receipt
Mailing Address 4440 West 95th Stre		12 28 2007
City <u>Oak Lawn</u>	State Zip Code IL 60453-2600	Transaction ID: 14920046 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Christ Medical Center	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	800.00	
Full Name (Last, First, Middle Initial) Mr. Peter McCanna		Date of Receipt
Mailing Address 2025 Schiller		12 28 2007
City	State Zip Code	Transaction ID: 14920048
Wilmette	IL 60091-2323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Northwestern Memorial Hos- pital	Occupation Senior Vice President and Chief Finar	od.
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Susan Nordstrom Lopez		Date of Receipt
Mailing Address 836 West Wellington	Avenue	1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14920376
Chicago FEC ID number of contributing	IL 60657-5147	Amount of Each Receipt this Period
federal political committee.	C	250.00
Name of Employer Advocate Illinois Masonic Medical Cent	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 305 (check only one) X 11a 11b 11c 12
	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jean Przybylek		Date of Receipt
Mailing Address 306 Highland City	State Zip Code	1 2 2 8 2 0 0 7 2 1 1 1 1 1 1 1 2 1 2 1 1 1 1 1 1 1 1
Elmhurst	IL 60126-2245	Transaction ID: 14921712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Northwestern Memorial Hos- pital	Occupation Vice President, Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Wilfredo Ramos		Date of Receipt
Mailing Address 2025 Windsor Drive		12 28 2007
City	State Zip Code	Transaction ID: 14921713
Oak Brook FEC ID number of contributing federal political committee.	IL 60523-1586	Amount of Each Receipt this Period 800.00
Name of Employer Advocate Health Care	Occupation Executive VP/Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Mr. James H Skogsbergh		Date of Receipt
Mailing Address 2025 Windsor Drive		M M / D D / Y Y Y Y Y 1 1 2 2 8 2 0 0 7
City Oak Brook	State Zip Code IL 60523-1586	Transaction ID: 14921729 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Health Care	Occupation President and Chief Executive Officer	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1550.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 305 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Keith E Steffen Mailing Address 530 NE Glen Oak A	venue		Date of Receipt
City Peoria	State IL	Zip Code 61637-0001	1 2 2 8 2 0 0 7 Transaction ID: 14921730 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer OSF Saint Francis Medical Center Receipt For: Primary General Other (specify) ▼	'	n rator and Chief Executive Of e Year-to-Date ▼ 800.00	fi
Full Name (Last, First, Middle Initial) Mrs. Rosemari Davis Mailing Address 2700 SE Stratus Avenue			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 14921732
McMinnville	OR	97128-6255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		163.00
Name of Employer Willamette Valley Medical Center		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. Timothy Herrmann	•		Date of Receipt
Mailing Address 1965 Alder Street			12 28 2007
City	State	Zip Code	Transaction ID: 14921737
<u>Eugene</u>	OR	97405-2937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Peace Harbor Hospital Receipt For:		sident, Operations	
Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	l)		913.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Llas concrete cohodula(a)	FOR LINE NUMBER: PAGE 247 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
	tatements may not be sold or used by any person name and address of any political committee to so	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Patricia Martinez		Date of Receipt
Mailing Address 1490 Montclair Terrace)	12 28 2007
City	State Zip Code	Transaction ID: 14921739
<u>Medford</u>	OR 97504-9241	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Asante Health System	Occupation Chief Quality Manager	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David T Underriner		Date of Receipt
Mailing Address 2690 Surrey Lane		M M / D D / Y Y Y Y Y 12 28 2007
City	State Zip Code	Transaction ID: 14921743
West Linn	OR 97068-2268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Milwaukie Hosp- ital	Occupation Interim Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 437.00	
Full Name (Last, First, Middle Initial) Mr. Russ Danielson		Date of Receipt
Mailing Address 1926 Aztec Court		1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14921744
West Linn	OR 97068-4804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Providence St. Vincent Me- dical Center	Occupation Sr. Vice President/CEO-Oregon Region	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 305 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Terry Smith Mailing Address 2525 NW 133 Pl. City Portland FEC ID number of contributing federal political committee. Name of Employer Providence Portland Medical Center Receipt For: Primary General Other (specify)	State Zip Code OR 97229-4571 C Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: 14921746 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Darryl L Vandervort Mailing Address 403 East First Street City Dixon FEC ID number of contributing federal political committee. Name of Employer Katherine Shaw Bethea Hospital Receipt For:	State Zip Code IL 61021-3187 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Terri L. Allen Mailing Address 1151 East Warrenville City Naperville EEC ID number of contributing	State Zip Code IL 60563-9339	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify)	Occupation Regional Manager Aggregate Year-to-Date 337.50	37.50
SUBTOTAL of Receipts This Page (optional)		1087.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 249 / 305 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Elena Butkus Mailing Address 1151 E. Warrenville	e Road		Date of Receipt 1 2 2 8 2 0 0 7
City Naperville FEC ID number of contributing federal political committee.	State IL	Zip Code 60563-9339	Transaction ID: 14921963 Amount of Each Receipt this Period 693.75
Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify) ▼		n sident, Finance e Year-to-Date ▼ 1693.75	
Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road			Date of Receipt 1 2 2 8 2 0 0 7
City Naperville FEC ID number of contributing federal political committee.	State IL C	Zip Code 60563-9339	Transaction ID: 14921976 Amount of Each Receipt this Period 93.75
Name of Employer Illinois Hospital Associa- tion Receipt For: Primary General Other (specify) ▼		of Development e Year-to-Date ▼ 1693.75	
Full Name (Last, First, Middle Initial) Ms. Lois DeTraglia Mailing Address 1151 E. Warrenville	e Rd.		Date of Receipt
City Naperville FEC ID number of contributing federal political committee.	State IL	Zip Code 60563-9339	1 2 2 8 2 0 0 7 Transaction ID: 14921977 Amount of Each Receipt this Period 31.26
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Human Resources Year-to-Date ▼ 364.70	
SUBTOTAL of Receipts This Page (optional	al)		818.76

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 250 / 305 (check only one) X
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Barbara Filliung		Date of Receipt
Mailing Address 1013 59th Street		12 28 2007
City	State Zip Code	Transaction ID: 14921981
Lisle	IL 60532-3122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.26
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Government Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	364.70	
Full Name (Last, First, Middle Initial) Mr. Brian Foster		Date of Receipt
Mailing Address 1151 E. Warrenville F PO Box 3015	d.	M M / D D / Y Y Y Y Y Y 1 1 2 8 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14921983
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	362.50
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1029.22	
Full Name (Last, First, Middle Initial) Ms. Tamara Lynn Gamrat	I	Date of Receipt
Mailing Address 1911 Hamilton Street		M M / D D / Y Y Y Y Y Y 1 Y 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14921985
Murphysboro	IL 62966-1519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	23.44
Name of Employer Illinois Hospital Associa- tion	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 273.52	
CURTOTAL of December This Page (antional)		417.20

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 305 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Teresa Hursey Mailing Address 1151 East Warrenville		Date of Receipt 1 2 2 8 2 0 0 7
City Naperville	State Zip Code IL 60563-9339	Transaction ID: 14922044
FEC ID number of contributing federal political committee.	IL 60563-9339	Amount of Each Receipt this Period 693.75
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Vice President, Finance Aggregate Year-to-Date ▼ 1693.75	
Full Name (Last, First, Middle Initial) Ms. Susan Kaufman Mailing Address 1151 E. Warranville F	Rd.	Date of Receipt 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: 14922046
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.50
Name of Employer Illinois Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 367.50	
Full Name (Last, First, Middle Initial) Ms. Nichole Magalis	1	Date of Receipt
Mailing Address 1151 East Warrenville		12 28 2007
City	State Zip Code	Transaction ID: 14922048
Naperville 550 IP	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.26
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 364.70	
		756.51

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 252 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jo Ann Spoor Mailing Address 700 South Second Str City Springfield FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify)	eet State Zip Code IL 62704-2516 C Occupation Manager, Finance Aggregate Year-to-Date 437.50	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Lori Williams Mailing Address 1151 East Warrenville City Naperville FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General	Road State Zip Code IL 60563-9339 C Occupation Chief Executive Officer Aggregate Year-to-Date 875.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) Full Name (Last, First, Middle Initial) Dr. Charles E Cavagnaro, III, M.D. Mailing Address 40 Wright Street City Palmer FEC ID number of contributing federal political committee. Name of Employer Wing Memorial Hospital and Medical Cen	State Zip Code MA 01069-1138 C Occupation President and Chief Executive Office	Date of Receipt M M M
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 450.00	312.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 253 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using t	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Katie Vaughan		Date of Receipt
Mailing Address 506 A East Howell A		M M / D D / Y Y Y Y
City <u>Alexandria</u>	State Zip Code VA 22301	Transaction ID: PR1034595120034
FEC ID number of contributing federal political committee.	C 22301	Amount of Each Receipt this Period 20.00
Name of Employer American Hospital Association-Washingt Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Associate Director Aggregate Year-to-Date 500.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton Mailing Address 325 Seventh Street,	NW	Date of Receipt
Suite 700		
City	State Zip Code DC 20004-2818	Transaction ID: PR1045726220034
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 100.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary General	Occupation VP & Chief Washington Counsel Aggregate Year-to-Date ▼	
Other (specify)	1000.00	P/R Deduction (\$50.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
Mailing Address 325 Seventh Street, Suite 700		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR1113464220034
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 25.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Section Director Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	262.50	P/R Deduction (\$12.50 Bi- Weekly)
CURTOTAL of Provinte This Prove (autional)	_	145.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 305 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Sohini Jindal		Date of Receipt
Mailing Address 325 Seventh Street, N		M M / D D / Y Y Y Y
City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR1125613620034 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Senior Associate Director Aggregate Year-to-Date 500.00	P/R Deduction (\$20.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Mr. Davon Gray Mailing Address 325 Seventh Street, N	W	Date of Receipt
Suite 700	State Zip Code	Transaction ID: PR1143013020034
<u>Washington</u>	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21.73
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Legislative Assistant Aggregate Year-to-Date	D/D Doduction (610.00 Bi
Other (specify) ▼	250.00	P/R Deduction (\$10.86 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Michelle Marie Mathy		Date of Receipt
Mailing Address 1660 Lanier Place NW Apt. 309	,	M M / D D / Y Y Y Y
City Washington	State Zip Code DC 20009-2947	Transaction ID: PR1300853720034 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.76
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Project Manager/PAC Coordinator Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	P/R Deduction (\$10.34 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		62.49

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 255 / 305 (check only one) X
Any information cop or for commercial p	oied from such Reports and St urposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
1 \	MITTEE (In Full) spital Association PAC			
Full Name (Last Ms. Emily Claire	First, Middle Initial)			Date of Receipt
Mailing Address	1200 North Veitch Stree Apt. 1023	et		M " M / D " D / Y " Y " Y " Y
City Arlington		State VA	Zip Code 22201-5818	Transaction ID: PR1315883920034
FEC ID number federal political of		C	22201-3010	Amount of Each Receipt this Period 9.62
Name of Employ American Hospi tion-Washingt Receipt For: Primary Other (spe	General	Occupation Project N		P/R Deduction (\$9.62 Bi-W-eekly)
Full Name (Last Mr. Alex White, J Mailing Address				Date of Receipt
City		State	Zip Code	Transaction ID: PR1339349920034
Chicago		IL	60606-3436	Amount of Each Receipt this Period
FEC ID number federal political of		C		120.00
Name of Employ American Hospi tion	rer tal Associa-	Occupatio Account	n Executive	
Receipt For: Primary Other (spe	General cify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	P/R Deduction (\$60.00 Bi- Weekly)
Full Name (Last Ms. Frances Mar	First, Middle Initial)			Date of Receipt
	One North Franklin			M ' M / D ' D / Y ' Y ' Y ' Y
City		State	Zip Code	Transaction ID: PR1347702720034
Chicago		IL	60606-3436	Amount of Each Receipt this Period
FEC ID number federal political of		C		50.00
Name of Employ American Hospi tion-Chicago Receipt For:	rer tal Associa-		n sident, Operatinos HRET e Year-to-Date ▼	
Primary Other (spe	☐ General ecify) ▼		500.00	P/R Deduction (\$25.00 Bi- Weekly)
SUBTOTAL of Re	ceipts This Page (optional)			179.62

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	y information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR1347703420034
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.28
	Name of Employer American Hospital Associa-	Occupation VP, Operations and Account Services	_
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	<u></u>
	Primary General		P/R Deduction (\$13.12 Bi-
	Other (specify) ▼	250.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay	1	Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703620034
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer American Hospital Associa-	Occupation Vice President & CIO	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify)	500.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347791020034
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.28
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	P/R Deduction (\$13.12 Bi- Weekly)
	UPTOTAL of Descript This Descript III		102.56

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 257 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any in	nformation copied from such Reports and St commercial purposes, other than using the	tatements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 1	AME OF COMMITTEE (In Full) merican Hospital Association PAC			
	ull Name (Last, First, Middle Initial) r. John Slotman			Date of Receipt
M	ailing Address 325 Seventh Street, NV Suite 700	N		M " M / D " D / Y " Y " Y " Y
Ci <u>W</u>	ty /ashington	State DC	Zip Code 20004-2802	Transaction ID: PR1384065320034 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	С		71.44
<u>tic</u>	ame of Employer merican Hospital Associa- n-Washingt eceipt For: Primary General Other (specify) ▼		e Director, Federal Relations Year-to-Date 250.04	P/R Deduction (\$35.72 Bi-Weekly)
M	ull Name (Last, First, Middle Initial) s. Linda Fishman	A.		Date of Receipt
_	ailing Address 325 Seventh Street, NV Suite 700	<i>N</i>		M M / D D / Y Y Y Y
Ci	•	State	Zip Code	Transaction ID: PR327629120034
FE	/ashington EC ID number of contributing deral political committee.	C	20004-2818	Amount of Each Receipt this Period 10.00
<u>tic</u>	ame of Employer merican Hospital Associa- nn-Washingt eceipt For:		n sident Federal Relations Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	1000.00	P/R Deduction (\$10.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) r. Lindsay Mac Robinson			Date of Receipt
M	ailing Address 107 East Lane			M M / D D / Y Y Y Y
Ci		State	Zip Code	Transaction ID: PR327727320034
<u>L</u> ;	ake Barrington	<u> </u>	60010-1939	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		100.00
Aı <u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For:		n sident, PMGs Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	1000.00	P/R Deduction (\$50.00 Bi- Weekly)
CUB	TOTAL of Receipts This Page (optional)			181.44

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 258 / 305 (check only one) X
Ai or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be name and address of	sold or used by any personal any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/_</u>	Full Name (Last, First, Middle Initial) Ms. Deborah F. Weiner			Date of Receipt
	Mailing Address 11004 Petersborough			M " M / D " D / Y " Y " Y " Y
	City Rockville	'	o Code 0852-3249	Transaction ID: PR327745920034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General	Occupation Director, Grass Aggregate Year-to	1 1 1 1 1 1	P/R Deduction (\$50.00 Bi-
	Other (specify)	0 0 0	1000.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue Mailing Address 122 N. Greenwood Ave) .		Date of Receipt
	City	State Zi	o Code	Transaction ID: PR327771620034
	Park Ridge	IL 60	0068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.28
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Staff Sp	ecialist	
	Receipt For:	Aggregate Year-te	o-Date ▼	
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$13.12 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	·	o Code	Transaction ID: PR327777220034
	Chicago	IL 60	0606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Director, Long- Aggregate Year-to		
	Primary General Other (specify) ▼	Ayyreyate real-to	250.00	P/R Deduction (\$12.50 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			151.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y
Chicago	State Zip Code	Transaction ID: PR327777820034
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer American Hospital Associa-	Occupation Vice President, Member Relations	
tion-Chicago ' Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		P/R Deduction (\$10.00 Bi-
Other (specify) ▼	250.00	Weekly)
Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
Mailing Address 1003 Kimberly Place		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR327801720034
Great Falls	VA 22066-1546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$25.00 Bi-
Other (specify)	500.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
Mailing Address 325 Seventh Street, I Suite 700	NW	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR327812020034
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer	Occupation	7
American Organization of Nurse Executi	Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1215.00	P/R Deduction (\$40.00 Bi- Weekly)
CURTOTAL of Descripto This Descriptoral		140.00
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number	er only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 260 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
	Mailing Address One North Franklin St	reet	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR327846220034
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.12
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Travel Se	erv
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	250.00	P/R Deduction (\$9.50 Bi-W-eekly)
	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga	1	Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	W	M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR327851920034
	Washington	DC 20008-2614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	500.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR327858020034
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Director, AHAPAC	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Г	UDTOTAL of Descripts This Descriptoral		109.12

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (crieck orlly orle)
Ai or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City Millis	State Zip Code MA 60606-3436	Transaction ID: PR327877820034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	86.71
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Regional Executive Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000	I I WEEKIW
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR327895720034
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 50.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. James Henderson	I	Date of Receipt
	Mailing Address One North Franklin St	reet	M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR328094120034
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation VP, Corporate Counsel Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$12.50 Bi- Weekly)
	SUPPORAL of Possints This Page (antional)		161.71

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate for each cate Detailed Sun		FOR LINE NUMBER: PAGE 262 / 305 (check only one) X
An or	y information copied from such Reports and S for commercial purposes, other than using the	atements may not be sold or uname and address of any poli	used by any person tical committee to so	for the purpose of soliciting contributions plicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700			M M / D D / Y Y Y Y
	City Washington	State Zip Code DC 20004-281	8	Transaction ID: PR328132820034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10.00
	Name of Employer American Hospital Associa-	Occupation President		
	tion-Washingt Receipt For: Primary General	Aggregate Year-to-Date	7	
	Other (specify) ▼		1000.00	P/R Deduction (\$45.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 South 7th Avenue			M M / D D / Y Y Y Y
	City	State Zip Code		Transaction ID: PR328136920034
	<u>La Grange</u>	IL 60525-640	06	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Me	mber Relations	
	Receipt For:	Aggregate Year-to-Date	7	
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$50.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian			Date of Receipt
	Mailing Address 5545 N. Wayne			M M / D D / Y Y Y Y
	City	State Zip Code		Transaction ID: PR328223820034
	Chicago	IL 60640-131	8	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President		
	Receipt For:	Aggregate Year-to-Date	7	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$25.00 Bi- Weekly)
				160.00

SCHEDULE A	(FEC Form 3X) EIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / (check only one) X 11a 11b 11c 12 13 14 15 16	305
Any information copied or for commercial purpo	from such Reports and State ses, other than using the na	ements may ame and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.	;
NAME OF COMMIT American Hospital	TEE (In Full) al Association PAC				
Full Name (Last, Fire Dr. James D. Bentley.				Date of Receipt	
Mailing Address 1	3106 Vingle Lane			M M / D D / Y Y Y	Y
City Silver Spring		State MD	Zip Code 20906	Transaction ID: PR32822492003 Amount of Each Receipt this Period	
FEC ID number of c federal political com		C		100.0	-
Name of Employer American Hospital A tion-Washingt	Associa-	Occupation Sr. Vice F			
Receipt For: Primary Other (specify	General) ▼	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$50.00 Bi- Weekly)	
Full Name (Last, Fire Mr. Richard J. Pollack				Date of Receipt	
	25 Seventh Street, NW uite 700			M M / D D / Y Y Y	Y
City		State	Zip Code	Transaction ID: PR32826092003	34
Washington		DC	20004-2818	Amount of Each Receipt this Period	
FEC ID number of c federal political com		C		40.0	0
Name of Employer American Hospital A tion-Washingt	Associa-	Occupation Executive	Vice President		
Receipt For:	7 -	Aggregate	Year-to-Date ▼		
Other (specify	_ General) ▼		1000.00	P/R Deduction (\$40.00 Bi- Weekly)	
Full Name (Last, Fire	st, Middle Initial)			Date of Receipt	
Mailing Address 1	221 Cavalier Road			M M / D D / Y Y Y	Y
City		State	Zip Code	Transaction ID: PR32831042003	34
Arnold		MD	21012-2126	Amount of Each Receipt this Period	
FEC ID number of c federal political com		C		100.0	0
Name of Employer American Hospital A tion-Washingt	ssocia-		President, Communications		
Receipt For: Primary Other (specify	General) ▼	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$50.00 Bi- Weekly)	
SURTOTAL of Receir	to This Page (entional)		\	240.0	0

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 264 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen		Date of Receipt
Mailing Address 1001 N. Potomac St.		M M / D D / Y Y Y
City	State Zip Code	Transaction ID: PR328312720034
Arlington	VA 22205-1629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer American Hospital Associa-	Occupation	
tion-Washingt	Senior Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	P/R Deduction (\$50.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR328341820034
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation	
tion-Washingt	Director, Political Action & Grassroot	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Dadwatian (\$40.00 Bi
Other (specify)	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR328490120034
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21.73
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	P/R Deduction (\$10.86 Bi- Weekly)
SURTOTAL of Receipts This Page (entional)		161.73

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 265 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Any ir or for	nformation copied from such Reports and S commercial purposes, other than using the	atements may not be sold on name and address of any p	or used by any person olitical committee to se	for the purpose of soliciting contributions olicit contributions from such committee.
1 \	AME OF COMMITTEE (In Full) merican Hospital Association PAC			
	ull Name (Last, First, Middle Initial) s. Carolyn Forcina			Date of Receipt
Ma	ailing Address 200 Clover Hill Court			M M / D D / Y Y Y Y
Ci Y	ity ardley	State Zip Code PA 19067-5		Transaction ID: PR328511820034 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C	7.00	47.60
<u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For: Primary General Other (specify) ▼	Occupation Regional Executive Aggregate Year-to-Date	1190.00	P/R Deduction (\$47.60 Bi- Weekly)
M	ull Name (Last, First, Middle Initial) s. Alicia N. Mitchell ailing Address 909 N. Madison St.	Date of Receipt		
Ci	ty	State Zip Code	<u> </u>	Transaction ID: PR328512020034
<u>A</u>	rlington	VA 22205-1	655	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		20.00
<u>tic</u>	ame of Employer merican Hospital Associa- on-Washingt	Occupation Vice President, Medi		
Re	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) s. Rebecca Chickey			Date of Receipt
Ma	ailing Address One North Franklin Str	eet		M M / D D / Y Y Y Y
Ci	•	State Zip Code	9	Transaction ID: PR329013420034
FE	hicago EC ID number of contributing deral political committee.	IL 60606	1 1	Amount of Each Receipt this Period 50.00
Ar <u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For:	Occupation Director, Psychiatric Aggregate Year-to-Date		
	Primary General Other (specify) ▼	0 0 0 0	500.00	P/R Deduction (\$25.00 Bi- Weekly)
SUR	TOTAL of Receipts This Page (optional)			117.60

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 305 (check only one) X 11a 11b 11c 12 15 16
or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR329071320034
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation President & COO, Leadership & Busin Aggregate Year-to-Date 1000.00	ess P/R Deduction (\$50.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR329084420034
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 43.46
Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Senior Associate Director Executive Br Aggregate Year-to-Date 500.00	P/R Deduction (\$21.72 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
Mailing Address 500 Interstate Bouleva	rd South	M M / D D / Y Y Y Y
City	State Zip Code TN 37210-4634	Transaction ID: PR329215720034
Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 100.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Regional Executive Aggregate Year-to-Date 1000.00	P/R Deduction (\$50.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		243.46

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 267 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin St	reet	M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR329342620034
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Hospital Associa-	Occupation CFO	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	P/R Deduction (\$12.50 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris	Date of Receipt	
	Mailing Address 1136 W. Farwel Unit 1W		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR329654220034
	Chicago	IL 60626-3861	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	250.00	P/R Deduction (\$12.50 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR330343320034
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Services Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	P/R Deduction (\$10.00 Bi- Weekly)
	UIDTOTAL of Descions This Desc (autional)		60.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 268 / 305 (check only one) X
An or i	y information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City Chicago	State IL	Zip Code 60606-3436	Transaction ID: PR330411620034
	FEC ID number of contributing federal political committee.	C	00000-3430	Amount of Each Receipt this Period 50.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	+ '	n e Regional Executive e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca	Date of Receipt		
	Mailing Address 4960 138th Circle Wes	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR330475420034
	Apple Valley	MN	55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard			Date of Receipt
	Mailing Address 6109 North 9th Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330534320034
	Arlington	VA	22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer American Hospital Associa- tion-Washingt	+ +	ciate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi- Weekly)
	JBTOTAL of Receipts This Page (optional)	•		140.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address 530 North Lakeshore Dunit 2303	Prive	M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR330547720034
	Chicago	IL 60611-7424	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa-	Occupation Vice President, Strategic Planning	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate rear-to-bate v	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	400.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address One North Franklin		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR330549220034
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	7
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	500.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
	Mailing Address 1101 N. Kentucky Stre	et	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331278820034
	Arlington	VA 22205-3515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31.18
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		P/R Deduction (\$15.55 Bi-
	Other (specify) ▼	250.00	Weekly)
	UIDTOTAL of Describe This Described		91.18

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 270 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
-	Mailing Address 26 West Glendale Av	е	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331304220034
	Alexandria	VA 22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.24
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public Polic	у Ор
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	P/R Deduction (\$19.02 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb		Date of Receipt
	Mailing Address 325 Seventh Street, 1 Suite 700	NW	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331379120034
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Organization of Nurse Executi	Occupation Director, Federal Relations & Policy	,
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	P/R Deduction (\$12.50 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	NW	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331386920034
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.50
	Name of Employer American Hospital Associa-	Occupation Senior Associate Director	
	tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	237.50	P/R Deduction (\$12.50 Bi- Weekly)
Г			75.74

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 271 / 305 (check only one) X
or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may e name and add	not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
F	ull Name (Last, First, Middle Initial)			Date of Receipt
_	failing Address PO Box 15587			M M / D D / Y Y Y Y
	city	State	Zip Code	Transaction ID: PR331416020034
<u> </u>	Austin	TX	78761-5587	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		62.30
	lame of Employer Imerican Hospital Associa- on	Occupation Regional	n Executive	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1499.99	P/R Deduction (\$62.30 Bi- Weekly)
	ull Name (Last, First, Middle Initial) Mr. Donald May			Date of Receipt
N	Mailing Address 521 Great Falls Street	M M / D D / Y Y Y Y		
C	Pity	State	Zip Code	Transaction ID: PR331533220034
<u> </u>	Falls Church	VA	22046-2613	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		40.00
N A <u>ti</u>	lame of Employer nmerican Hospital Associa- on-Washingt	Occupation Vice Pres	n sident, Policy	
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) As. Elizabeth Summy			Date of Receipt
N	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	Pity	State	Zip Code	Transaction ID: PR346168120034
<u>(</u>	Chicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		41.73
<u>t</u> i	American Hécnital Accoria		n e Director, ASHRM	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.99	P/R Deduction (\$20.91 Bi- Weekly)
SUI	BTOTAL of Receipts This Page (optional)	1		144.03

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 305 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions eto solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	N	M " M / D " D / Y " Y " Y " Y
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR517619720034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.40
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Senior Director Executive Branch I Aggregate Year-to-Date 1000.00	Relat P/R Deduction (\$39.20 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson Mailing Address 606 South Royal Street	t	Date of Receipt
	City	State Zip Code	Transaction ID: PR766023720034
	Alexandria	VA 22314-4142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	76.74
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director, Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$57.50 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	N	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR876637220034
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Associate Director	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi-Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		165.14

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 305 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR936292320034
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Director	n of Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David A. Strickland			Date of Receipt
	Mailing Address One N. Franklin Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR939603920034
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer American Organization of Nurse Executi	Occupatio Director	n of Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	>	35.00
TOTAL This Period (last page this line number only)	•	248158.29

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 274 / 305 (check only one) 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) New Mexico Hospital & Health System Associatio	n		Date of Receipt
	Mailing Address 2121 Owuna NE			12 10 2007
	City	State	Zip Code	Transaction ID: 14835199
	Albuquerque	NM	87113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		8430.00
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 8430.00	Deposited in Error and transferred to Admin Acct. See Line 29
- В.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
	Mailing Address 1400 G Street, NW			1 2 3 1 2 0 0 7
	City	State	Zip Code	Transaction ID: 14926743
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		482.86
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 4356.57	Bank Interest

		9012.06
SUBTOTAL of Receipts This Page (optional)		8912.86
TOTAL This Period (last page this line number only)	•	8912.86

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 275 / 305 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D)rive	Date of Receipt
City <u>Madison</u>	State Zip Code WI 53725-9038	Transaction ID: 14835210 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00359455	600.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 9125.00	
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D)rive	Date of Receipt 1 2 1 7 2 0 0 7
City	State Zip Code	Transaction ID: 14835211
Madison	WI 53725-9038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00359455	4637.42
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 13762.42	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal		Date of Receipt
Mailing Address 1215 K Street Suite 800		12 20 2007
City	State Zip Code	Transaction ID: 14837247
Sacramento FEC ID number of contributing federal political committee.	CA 95814 C C00237495	Amount of Each Receipt this Period 13864.00
Name of Employer	Occupation	\dashv
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 169864.00	
SUBTOTAL of Receipts This Page (optional)		19101.42

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 305 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NY 12144 C C00160259 Occupation Aggregate Year-to-Date 135000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) PAC of Missouri Hospital Association Mailing Address P.O. Box 60 City Jefferson City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code MO 65102 C C00289777 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587 City Austin FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587 C C00301325 Occupation Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y 1 2 0 0 7 Transaction ID: 14860377 Amount of Each Receipt this Period 13000.00
SUBTOTAL of Receipts This Page (optional)		20780.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedul for each category of the Detailed Summary Pa	le(s) ne	FOR LINE NUMBER: PAGE 277 / 305 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and State or for commercial purposes, other than using the r	atements maname and add	y not be sold or used by a dress of any political com	ny person t	for the purpose of soliciting contributions slicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Α.	Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal				Date of Receipt
	Mailing Address P.O. Box 15587				12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		Transaction ID: 14860378
	Austin	TX	78761-5587		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0301325		2500.00
	Name of Employer	Occupatio	on		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 88500	.00	
В.	Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal				Date of Receipt
	Mailing Address P.O. Box 15587				12 31 2007
	City	State	Zip Code		Transaction ID: 14860997
	Austin	TX	78761-5587		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0	0301325		1610.00
	Name of Employer	Occupatio	on		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼	.00	

SUBTOTAL of Receipts This Page (optional)		4110.00
SOUTH OF THE OF THE FIRST AGE (Optional)		
TOTAL This Period (last page this line number only)	•	43991.42

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 278 / 305
	ITEMIZED RECEIPTS		for each category of the	(check only one)
	II LIVIIZED RECEIP 13		Detailed Summary Page	11a 11b 11c 12
[Assistance discounting and Ole			13 14 15 X 16 17
	Any information copied from such Reports and Stator for commercial purposes, other than using the n	atements may name and add	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			_
Α.	Full Name (Last, First, Middle Initial) Hoosiers for Hill			Date of Receipt
	Mailing Address PO Box 1071			12
	City	State	Zip Code	Transaction ID: 14927128
	Seymour	IN	47274	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0411835	4000.00
	Name of Employer	Occupation	n	
	Receipt For: 2008 X Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4000.00	Refund
В.	Full Name (Last, First, Middle Initial) Carney For Congress			Date of Receipt
	Mailing Address PO Box A			1 2 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 14927129
	Clarks Summit	PA	18411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0414391	3000.00
	Name of Employer	Occupation	n	
	Receipt For: 2008 X Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3000.00	Refund

		7000.00
SUBTOTAL of Receipts This Page (optional)	>	7000.00
TOTAL This Period (last page this line number only)	<u> </u>	7000.00

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C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN	E NUMBI	ER:		PA	GE	279 /	305
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	X 21b 27	22 28a	23	L	24 28c	П	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Merchant Bankcard Mailing Address 1601 Elm Street					of Disb				0 ŏ 7	Y
	State Zip Code TX 75201			Amo	unt of E	ach l	Disburse	ment	this F	Period
Purpose of Disbursement Merchant Service Fee Candidate Name		Ca	001 tegory/					1	45.7	4
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	<u> </u>	, jp 0	Merc	hant S	ervi	ce Fee			
Full Name (Last, First, Middle Initial) Merchant Bankcard					of Disb		D / Y		0 ŏ 7	, Y
Mailing Address 1601 Elm Street City	State Zip Code						Disburse			
Dallas	TX 75201			Aillo	unit Or L	aciii	Disbuise	iiiGiit	3.5	-
Purpose of Disbursement Merchant Service Fee Candidate Name		Ca	001 tegory/ Type	L.			•	0	3.0	0
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)			Merc	hant S	ervi	ce Fee			
Full Name (Last, First, Middle Initial) Citibank, F.S.B.					saction of Disb		149267 ment	55		
Mailing Address 1400 G Street, NW				1 ^M 2	M /	^D 1	B / Y	ž	0 ŏ 7	, Y
Washington	State Zip Code DC 20005			Amo	unt of E	ach l	Disburse	-		
Purpose of Disbursement Bank Fee			001	L.					52.5	U
Candidate Name			tegory/ ype							
Senate President	ement For: Primary General Other (specify)			Bank	Fee					
State: District:										
SUBTOTAL of Disbursements This Page (optional) .		<u></u>	▶					2	01.7	4

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:		P	AGE	280	/ 305
ITEMIZED DISBURSEMENTS		category of the Summary Page	۱.	X	_	П	22 28a	П	23 28b	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													3
NAME OF COMMITTEE (In Full)													
American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Peter D. Hart Research Associates, Inc.									on ID:	149271 ement	30		
Mailing Address 1724 Connecticut Avenue	e, NW							M		9 /	Ý Ž	ó ó 7	7 ^Y
,	State DC	Zip Code 20009					Amou	nt o	f Each	Disburse	emer	t this I	Period
Purpose of Disbursement	DO	20009		~	25						13	0.000	0
Polling Services Candidate Name			Ca	ate	95 egory/ pe								
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼					Pollin	g S	ervice	es			
Full Name (Last, First, Middle Initial)							Tuono		an ID:	140071	21		
Peter D. Hart Research Associates, Inc.							Date		isburse			, · · · ·	V
Mailing Address 1724 Connecticut Avenue	e, NW						1 2	IVI	1	9 /	2	o ŏ	7 '
,	State DC	Zip Code 20009					Amou	nt o	f Each	Disburse	emer	t this I	Period
Purpose of Disbursement In-Kind to Hill (IN-9). See line 23.				00	05		L.	_			-4	875.0	0
Candidate Name					gory/ pe								
Senate President	ment For: Primary Other (spe	General ecify) ▼					In-Kin See li	id to ne 2	Hill 23.	(IN-9).			
Full Name (Last, First, Middle Initial) Momentum Analysis							Date of	of Di	isburs				
Mailing Address 1508 Monroe Street, NW							1 ^M 2	М	1	9 /	Ž	o ŏ 7	7 ^Y
	State DC	Zip Code 20010					Amou	nt o	f Each	Disburse	emen	t this I	Period
Purpose of Disbursement Polling Services				00	05		L.				13	0.000	0
Candidate Name					egory/ pe								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General					Pollin	g S	ervice	es			
State: District:		-· •											
SUBTOTAL of Disbursements This Page (optional) .											211	125.0	0

TOTAL This Period (last page this line number only)

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5(CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 281/305
IT	EMIZED DISBURSEMENTS	for each category of the	(check only	
-		Detailed Summary Page	X 21b	22 23 24 25 26 200 200 200 200
_			27	28a 28b 28c 29 30b
	y Information copied from such Reports and State for commercial purposes, other than using the nar			
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial)			Transaction ID: 14927135
	Momentum Analysis			Date of Disbursement
				12 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1508 Monroe Street, NV	I		12 27 2007
	City	State Zip Code		Amount of Each Disbursement this Period
	Washington	DC 20010		
	Purpose of Disbursement			-4875.00
	In-Kind to Carney (PA-10). See line 23.		005	
	Candidate Name		Category/	
			Туре	
	Office Sought: House Disburs	ement For:		In-Kind to Carney (PA-10)
	Senate	Primary General		In-Kind to Carney (PA-10). See line 23.
	President	Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	-4875.00
TOTAL This Period (last page this line number only)	<u> </u>	16451.74

П	PLUSED DISSUIDATION	Use separate sche			R LINE I eck only							
	EMIZED DISBURSEMENTS	for each category of Detailed Summary			21b 27	22 28a	X 23 28b	\Box	24 28c	2:	_	26
	y Information copied from such Reports and Stat for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)											
	American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) Reed Committee					Date of	ction II	semer			V * V	
	Mailing Address PO Box 8628					12		0 3	/ <u>_</u>	20	ŏ7 [°]	
	City Cranston	State Zip Coo RI 02920				Amoun	t of Eac	h Dist	ourser			iod
	Purpose of Disbursement Contribution Candidate Name			011 Catego						100	J.00	
	Sen. Jack Reed Office Sought: House Disbu X Senate President State: RI District:	rsement For: 200 X Primary G Other (specify)	08 eneral	Туре	9	Contrib	oution					
	Full Name (Last, First, Middle Initial) KPAC Mailing Address Post Office Box 82036	5				Transa Date of	Disbur	semer			ý - Ý 0 7	1
	1 031 Office DOX 02030	J									-	
	City	State Zip Coo				Amoun	t of Eac	h Disk	ourser	nent th	is Per	iod
	City Dallas Purpose of Disbursement 2007 Contribution Candidate Name	State Zip Coc TX 75382		011 Catego	ory/	Amoun	t of Eac	h Dist	ourser	nent th		riod
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name	TX 75382			ory/	Amoun 2007 C			ourser			riod
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: House Senate President	TX 75382		Catego	ory/	2007 C	Contrib ction II	ution D: 148 semer	80818	1000	0.00	
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	TX 75382		Catego	ory/	2007 C	Contrib ction II	ution D: 148 semer	80818	1000		
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Senate Majority Fund	TX 75382	eneral de	Catego	ory/	2007 C	Contrib ction II	ution D: 148 semer 0 3	80818 ht	1000 36 20).00) 7 7 0 7	
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Senate Majority Fund Mailing Address Post Office Box 32025 City	TX 75382 rsement For: Primary G Other (specify) ▼	eneral	Catego	ory/	2007 C	Contribuction II	ution D: 148 semer 0 3	80818 ht	1000 36).00) 7 7 0 7	
	Dallas Purpose of Disbursement 2007 Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Senate Majority Fund Mailing Address Post Office Box 32025 City Phoenix Purpose of Disbursement 2007 Contribution Candidate Name	TX 75382 rsement For: Primary G Other (specify) ▼ State Zip Coc AZ 85064	eneral	Catego Type 011 Catego	ory/	2007 C	Contribuction III	ution D: 148 semer 0 3	80818 ht	1000 36 20).00) 7 7 0 7	

	B (FEC Form	² Use sep	arate schedule(s)	_	E NUMBER: PAGE 283 / 305
ITEMIZED I	DISBURSEMEN	TS for each	category of the Summary Page	(check or 21b 27	11y one) 22
					of for the purpose of soliciting contributions solicit contributions from such committee
NAME OF CO	DMMITTEE (In Full) ospital Association P		, , , , , , , , , , , , , , , , , , ,		
	st, First, Middle Initial) Senator John Cornyr	ı Inc			Transaction ID: 14808188 Date of Disbursement
Mailing Addre	ss 6850 Austin Ce Suite 180	entre Blvd			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Austin	Guilo 100	State TX	Zip Code 78731		Amount of Each Disbursement this Perio
Purpose of Di Contribution				011	1000.00
Candidate Na Sen. John C	Cornyn	I Bulancia	0000	Category/ Type	_
Office Sought	X Senate President	Disbursement For: Primary Other (spe	2008 X General ecify) ▼		Contribution
,	District: ast, First, Middle Initial) or Congress				Transaction ID: 14808192
Mailing Addre					Date of Disbursement Max
City Rogers		State AR	Zip Code 72757		Amount of Each Disbursement this Perio
Purpose of Di Contribution	sbursement			011	1000.00
Candidate Na Rep. John N	_			Category/ Type	
Office Sought State: AR	X House Senate President District: 03	Disbursement For: X Primary Other (spe	2008 General ecify)		Contribution
Full Name (La	ast, First, Middle Initial) Connie Mack				Transaction ID: 14808193 Date of Disbursement
Mailing Addre	ss P.O. Box 519 Pmb 388				$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
City Naples		State FL	Zip Code 34106		Amount of Each Disbursement this Period
	sbursement			011	1500.00
Purpose of Di Contribution	mo			Category/	
Contribution Candidate Na Rep. Connie	e Mack, IV	Dishura and Francisco	0000	Туре	
Contribution Candidate Na	e Mack, IV	Disbursement For: X Primary Other (spe	2008 General ecify)	Туре	Contribution

SCHEDIII F B (FFC Form 3Y)

	HEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check on	E NUMBER: PAGE 284 / 305
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28b 28c 29
	r Information copied from such Reports and State or commercial purposes, other than using the na			
$\overline{}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC	· · · · · · · · · · · · · · · · · · ·		
_	Full Name (Last, First, Middle Initial)			Transaction ID: 14808215
	Pascrell For Congress Inc.		Date of Disbursement	
	Mailing Address P.O. Box 640			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Totowa	State Zip Code NJ 07511		Amount of Each Disbursement this Perio
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	Mailing Address 400 North Capitol St, N Suite 585		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
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Mailing Address P.O. Box 8508 City Utica Purpose of Disbursement Contribution Candidate Name Mr. Michael Arcuri Office Sought: X House Senate President State: NY District: 24 Full Name (Last, First, Middle Initial) Halvorson for Congress Mailing Address PO Box 176 City State Zip Code (Lategory) Type Condidate Name Obisbursement For: 2008 Senate President State: NY District: 24 Full Name (Last, First, Middle Initial) Halvorson for Congress Mailing Address PO Box 176 City State Zip Code IL 60417 Purpose of Disbursement Contribution Candidate Name Debbie Halvorson Office Sought: X House Senate President State: IL District: 11 Full Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth City State Zip Code Other (specify) ▼ Transport General State: IL District: 11 Full Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth City State Zip Code Other (specify) ▼ Condidate Name Debbie Halvorson Condidate Name Debbie Halvorson Office Sought: X House Senate President State: IL District: 11 Full Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth City Columbus OH 43215 Purpose of Disbursement	
r for commercial purposes, other than using the name and address of any political committee to solicit cor NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Arcuri For Congress Mailing Address P.O. Box 8508 City State Zip Code Utica NY 13505 Purpose of Disbursement Contribution Candidate Name President State: NY District: 24 Full Name (Last, First, Middle Initial) State: NY District: 24 Full Name (Last, First, Middle Initial) Halvorson for Congress Mailing Address PO Box 176 City State Zip Code General Other (specify) ▼ Trail Name (Last, First, Middle Initial) Halvorson for Congress Mailing Address PO Box 176 City State Zip Code IL 60417 Purpose of Disbursement Contribution Candidate Name Debbie Halvorson Office Sought: X House Senate President State: IL District: 11 Full Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth City State Zip Code Other (specify) ▼ Trail Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth City State Zip Code Other (specify) ▼ Congress Mailing Address 81 S. Fifth City State Zip Code Other (specify) ▼ Disbursement State: IL District: 11 Full Name (Last, First, Middle Initial) Stivers for Congress Mailing Address 81 S. Fifth	X 23 24 25 28c 29
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	City Hopkinsville	State Zip Code KY 42241				Amou	nt of	Each	Disb	ursem	ent this	
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	Mailing Address P.O. Box 8					1 ^M 2	М	D 2	2 0	/ L	ž	0 ŏ 7	Y
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	City New York	State Zip Code NY 10016				Amou	nt of	Each	Disb	urser			-
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NAME OF COMMITTEE (In Full)				
American Hospital Association PAC				
Full Name (Last, First, Middle Initial)			Transaction ID: 149	928128
Solis For Congress			Date of Disbursemen	
Mailing Address 6380 Wilshire Blvd. #161	2		12 / 28	2007
•	State Zip Code		Amount of Each Disk	oursement this Period
	CA 90048			-1000.00
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Candidate Name		Category/		
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, <u>x</u>	ment For: 2008 Primary General Other (specify)		Void of 9/07 check	
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CHC-BOLD PAC:Building our Leadership I	Diversity PAC		Date of Disbursemen	-
Mailing Address Post Office Box 310			$\begin{bmatrix} 1 & 2 & M \end{bmatrix}$	^Y 2007
	State Zip Code		Amount of Each Disk	oursement this Period
	DC 20003			-1000.00
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial)			
	Fund for Political Education			Transaction ID: 14835202 Date of Disbursement
	Mailing Address 325 Seventh Street, NV Suite 700	I		12 M / 20 / Y 2007
	City Washington	State Zip Code DC 20004		Amount of Each Disbursement this Period
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SUBTOTAL of Disbursements This Page (optional)	•	8930.00
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